



CITY OF SAND CITY

1 Pendergrass Way Sand City, CA 93955
 Phone (831) 394-3054 • Fax (831) 394-2472

BUSINESS LICENSE APPLICATION

<i>Please Check One</i>	
New Business	<input type="checkbox"/>
Change of Owner	<input type="checkbox"/>
Change of Address	<input type="checkbox"/>
Change of Business Name	<input type="checkbox"/>
Home Occupation Business	<input type="checkbox"/>
One-Time Job in Sand City	<input type="checkbox"/>

PLEASE TYPE OR PRINT CLEARLY:		OFFICIAL USE ONLY	
Business Name <small>(Include DBA)</small>	_____	BUSINESS LICENSE NO.	_____
Business Location <small>(Not P.O. Box)</small>	_____	EXPIRATION DATE	_____
City _____ State _____ Zip _____		AMOUNT PAID \$	_____
Mailing Address <small>(if Different)</small>	_____	DATE PAID _____ CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	
City _____ State _____ Zip _____		RECEIPT NO.	_____
Bus. Phone _____ Bus. Fax _____		CITY APPROVALS - SIGN & DATE	
Business Website _____		APPROVED:	SIGNED:
Email Address _____		Planning: YES <input type="checkbox"/> No <input type="checkbox"/>	_____
Business Start Date: _____	Description of Business _____	Building: YES <input type="checkbox"/> No <input type="checkbox"/>	_____
		Fire: YES <input type="checkbox"/> No <input type="checkbox"/>	_____
		Health: YES <input type="checkbox"/> No <input type="checkbox"/>	_____

Ownership Corporation Limited Liability Corp. Partnership Sole Proprietor Trust Limited Partnership

State Lic. No. _____ Lic. Type _____ Expiration Date _____ Zoning Permit Issued? Yes No

Resale No. _____ Federal ID No. _____ State ID No. _____

ENTER BELOW NAMES OF OWNERS, PARTNERS, OR CORPORATE OFFICERS - Attach additional page if necessary

Primary Business Contact Person Name _____ Phone () _____

Home Address _____ Title _____ Phone () _____

City _____ State _____ Cell Phone () _____

Driver Lic. No. _____ Social Security No. _____

Owner Name _____ Phone () _____

Home Address _____ Cell Phone () _____

City _____ State _____

Driver Lic. No. _____ Social Security No. _____

EMERGENCY CONTACT (Person with building access)

Name _____ Phone () _____

Address _____ Cell Phone () _____

ALARM COMPANY: (If applicable)

Name _____ Contact _____ Phone () _____

Address _____ Licenses No. _____

<p>NEW BUSINESS</p> <p>Estimated Gross Receipts from Opening Date through June 30 of the Current Fiscal Year \$ _____</p> <p>EXISTING BUSINESS:</p> <p>Total Gross Receipts from July 1, _____ through June 30, _____ (year) (year) \$ _____</p> <p>ONE-TIME JOB ONLY:</p> <p>Estimated Total Receipts from one-time job only \$ _____</p>	<p>If your principal business is inside of Sand City, PLEASE CALCULATE AMOUNT DUE BELOW:</p> <table border="1"> <tr> <td>GROSS RECEIPTS FEE</td> <td></td> </tr> <tr> <td>First \$100,000 of receipts</td> <td>\$ 150.00</td> </tr> <tr> <td>Balance over \$100,000 x .0011</td> <td>\$ _____</td> </tr> <tr> <td>TOTAL GROSS RECEIPTS FEE</td> <td>\$ _____</td> </tr> </table> <table border="1"> <tr> <td>License Fee</td> <td>\$ _____</td> </tr> <tr> <td>Employee / Units / Vehicle Fee</td> <td>\$ _____</td> </tr> <tr> <td>Other Fees</td> <td>\$ _____</td> </tr> <tr> <td>Penalty Fee, if applicable</td> <td>\$ _____</td> </tr> <tr> <td>State CASp Fee</td> <td>\$ 1.00</td> </tr> <tr> <td>TOTAL AMOUNT DUE</td> <td>\$ _____</td> </tr> </table> <p><small>*NOTICE: Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx - The Department of Rehabilitation at www.rehab.cahwnet.gov - The California Commission on Disability Access at www.cdda.ca.gov.</small></p>	GROSS RECEIPTS FEE		First \$100,000 of receipts	\$ 150.00	Balance over \$100,000 x .0011	\$ _____	TOTAL GROSS RECEIPTS FEE	\$ _____	License Fee	\$ _____	Employee / Units / Vehicle Fee	\$ _____	Other Fees	\$ _____	Penalty Fee, if applicable	\$ _____	State CASp Fee	\$ 1.00	TOTAL AMOUNT DUE	\$ _____
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<p>No. of Units: _____ Business Square Feet: _____</p> <p>No. of Employees: Full-time _____ Part-Time _____</p> <p>No. of Coin-Operated Machines: _____</p> <p>No. of Vehicles: _____ Vehicle License No. _____ <small>(Attach additional page if necessary)</small></p>																					

PLEASE COMPLETE ADDITIONAL INFORMATION ON REVERSE SIDE



CITY OF SAND CITY

BUSINESS LICENSE INFORMATION

IMPORTANT INFORMATION - PLEASE READ CAREFULLY:

- The City of Sand City requires a business license to operate any type of business in the City. You may not operate your business until such time that all City requirements are met, business license fees are paid, and you have been issued a business license certificate by the City.
- **IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE THAT ALL NECESSARY CLEARANCES AND/OR PERMITS ARE OBTAINED FROM THE VARIOUS CITY DEPARTMENTS; i.e.; Building, Engineering, Planning, Police, Fire, etc.** The applicant must conform to all existing zoning ordinances set forth by the Planning Department. Check with each department to set up a date for inspection or to obtain information regarding your particular business operation and location.
- **WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE FOR EMPLOYEES IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO \$100,000, IN ADDITION TO THE COST OF COMPENSATION DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE CALIFORNIA LABOR CODE, INTEREST, AND ATTORNEY'S FEES.**
- The License Fee is due July 1 and is delinquent on August 1. Penalties are 25% per month, up to 50% of fee.
- You must check with the State Board of Equalization to see if you are required to have a Seller's Permit. No business license will be issued until a Seller's Permit number is provided to the City.
- It is the responsibility of the business owner to notify the Business License Office immediately if there are any changes to the business entity from the information submitted on this application.
- Our goal is to issue your business license as quickly as possible. In order to do so, we ask that you be specific and provide complete information below. If the information requested is not applicable to your business, leave the space blank. The information provided will be held in strict confidence and will be used only for official City business.
- If the application is withdrawn after processing for any reason, the application fee is non-refundable.

PLEASE PROVIDE INFORMATION ABOUT YOUR BUSINESS AS REQUESTED BELOW

CHECK ONE OF THE FOLLOWING:	COMMERCIAL PROPERTY RENTALS																								
<p> <input type="checkbox"/> Retail Business <input type="checkbox"/> Wholesale Business <input type="checkbox"/> Service } Fee based on Gross Receipts </p> <p> <input type="checkbox"/> Open Storage _____ sq. ft. @ \$.12 cents per square foot <input type="checkbox"/> Close Storage _____ sq. ft. @ \$.12 cents per square foot (\$50.00 minimum fee for both open and closed storage) </p> <p> <input type="checkbox"/> Residential Rental - \$5.00 per rental unit <input type="checkbox"/> Commercial Rental - \$25.00 per rental unit </p> <p>Vehicles:</p> <p> <input type="checkbox"/> Delivery of gasoline, oil or other petroleum products - \$60.00 per vehicle <input type="checkbox"/> Wholesale pickup/delivery (other than produce) - \$40.00 per vehicle <input type="checkbox"/> All other vehicles - \$30.00 per vehicle </p> <p> <input type="checkbox"/> Vending Machines - \$5.00 per machine <input type="checkbox"/> Consultant - \$25.00 minimum fee <input type="checkbox"/> Developer - \$250.00 <input type="checkbox"/> One-time Job, short-term, few days - \$50.00 Name and location of job: _____ _____ </p> <p> <input type="checkbox"/> Other - explain: _____ </p>	<p>If you rent commercial property to a business, please complete the information below:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Name of Business Currently renting or sub-leasing premises</th> <th style="width: 20%;">Street Address & Suite No.</th> <th style="width: 20%;">Date Lease Began</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>List below the name and address of person(s) from whom you rent spaces.</p> <p>_____</p> <p>_____</p>	Name of Business Currently renting or sub-leasing premises	Street Address & Suite No.	Date Lease Began																					
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CONTRACTORS	PRINCIPAL BUSINESS OUTSIDE OF SAND CITY																								
<p>Will you be using Sub-Contractors for this job? Yes _____ No _____</p> <p>Please list below all Sub-Contractors you will be employing for each job:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Business License fees must also be paid by businesses located in Sand City that conduct most of their business activity outside of Sand City limits. Sand City business license fees must be paid on 15% of the business conducted outside of Sand City as shown below.</p> <p>Example: Total Gross Receipts are \$1,300,000 with \$500,000 earned inside Sand City and \$800,000 earned outside Sand City</p> <table style="width: 100%;"> <tr> <td>Fee for the first \$100,000 of Gross Receipts</td> <td style="text-align: right;">= \$150.00</td> </tr> <tr> <td>plus \$400,000 inside Sand City x .0011 fee</td> <td style="text-align: right;">= 440.00</td> </tr> <tr> <td>plus fee for 15% of \$800,000 outside Sand City:</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">.15 x \$800,000 = 120,000 x .0011 fee</td> <td style="text-align: right;">= <u>+132.00</u></td> </tr> <tr> <td>Total due for \$500,000 Gross Receipts inside Sand City and \$800,000 Gross Receipts outside Sand City limits</td> <td style="text-align: right;">= \$722.00</td> </tr> </table> <p>Verification of Business License fees paid outside of Sand City must be included with this application.</p>	Fee for the first \$100,000 of Gross Receipts	= \$150.00	plus \$400,000 inside Sand City x .0011 fee	= 440.00	plus fee for 15% of \$800,000 outside Sand City:		.15 x \$800,000 = 120,000 x .0011 fee	= <u>+132.00</u>	Total due for \$500,000 Gross Receipts inside Sand City and \$800,000 Gross Receipts outside Sand City limits	= \$722.00														
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<p>I hereby certify, under penalty of perjury, that the information contained in this application and any attachments is true and complete to the best of my knowledge. I agree to comply with all applicable laws and ordinances regulating the operation of this business.</p>																									
Signature of Owner or Representative	Print Name	Title	Date																						
RETURN COMPLETED FORM TO ADDRESS ON REVERSE SIDE WITH A CHECK MADE PAYABLE TO THE CITY OF SAND CITY																									