

City of Sacramento • Revenue Division 915 | Street, Room 1214 • Sacramento, California 95814 916.808.8500

NEW BUSINESS LICENSE

TAX APPLICATION

http://www.cityofsacramento.org/finance/revenue/

PLEASE PRINT OR TYPE	NO

BUSINESS ACTIVITY INFORMATION													
BUSINESS NAME (DBA NAME USED TO IDENTIFY YOUR BUSINESS)										CHANGES?	ς	STARTING DATE	
BUSINESS PHONE NO.	PORATION PHC	ON PHONE NO						HIP TYPE	.3 [
()								SOLE DLLC CORPORATION TRUST					
EMAIL ADDRESS	WEB SITE ADD	WEB SITE ADDRESS								OTHER			
STATE CERT,/LICENSE NO.	NSE NO. EXP. DATE FEDERAL ID NO. STATE EMPLOYER ID NO. I						NO. OF EMPLO	VECC					
STATE CENT/LICENSE NO.	EXP. DATE	FEDENAL	ID NO.		STATE EINIPLOTER ID NO. N		NU. UF ENIF LU	YEES					
BUSINESS DESCRIPTION	BUSINESS DESCRIPTION												
BUSINESS LOCATION ADDRESS													
BUSINESS ZONED: COMMERCIAL OR RESIDENTIAL HOME OCCUPATION PERMIT #(CHECK ONE)													
OWNER/CORPORATION ADDRESS (STREET NAME AND NO., SUITE NO., CITY, STATE, ZIP CODE)													
UE CODDODATION, NAME (ADDDECC TO DECEME LECAL DOCUMENTS													
IF CORPORATION: NAME/ADDRESS TO RECEIVE LEGAL DOCUMENTS													
MAILING ADDRESS (WHERE YOU WANT US TO MAIL THE BUSINESS TAX CERTIFICATE OR OTHER CORRESPONDENCE)													
<u> </u>													
CONTACT INFORMATION													
OWNER OR CORPORATE OFFICERS' NAME & TITLE (STATE CONTRACTOR, SE			SEE BELOW*)	EE BELOW*) RELATIONSHIP TO COMPANY				AL SECURI	ITYNO.		CA DR	IVER'S LICENSE	
1)													
2)													
3)		_	_					_					
*STATE CONTRACTOR LICENSE	E NO.												
BUSINESS LICEN			N				RES	RESOURCE INFORMATION					
GROSS RECEIPTS – estimated for the first year or						Plea	blease note: Once you are registered the City's						
actual for renewal GROSS PAYROLL – estimated for the first year or			\$	\$					Please note: Once you are registered, the City's Economic Development Department will send you business resource information by e-mail or mail.				
actual for renewal													
# OF YEARS LICENCED	WITH THE STATE												
# OF RENTAL UNITS (I	F APPLICABLE)												
# OF PROFESSIONAL I	EMPLOYEES		+										
I declare under penalty of perjury that to my knowledge all information contained on this application is true and correct. This tax certificate is for revenue purposes													
only and does not imp	ly conformance with a	pplicable	city codes a	nd ordin	iances. You are adv	vised to	o check your	propos	sed busi	ness loca			
City Planning Division	for compliance with zo	ning code	es and the B	Building I	nspections Divisio	on for co	ompliance w	ith buil	lding co	des.			
SIGN HEREDATE													
TEMPORARY CERTIFICATE		VOID IF NOT				FOR OFFICIAL CITY USE ONLY							
	t valid more than 45 days from validation date VOID IF NOT				TAX	\$							
Your Business Tax Certif		u		VALIDATED				BIA	\$				
approximately two weeks.									HOP	\$			
This certificate must be	renewed annually							DU	P/PEN	\$			
								Dis.	Access	\$	4.0	0	
							-	-	Fee TOTAL	\$			
							-		BY				