



**City of Portola**  
 35 Third Avenue ▪ Portola, CA 96122  
 Phone: (530) 832-4216 ▪ Fax: (530) 832-5418  
 ▪ [www.ci.portola.ca.us](http://www.ci.portola.ca.us) ▪

## BUSINESS LICENSE APPLICATION

Business Name: \_\_\_\_\_ New Application  Change

Corporate Name: \_\_\_\_\_ Business Start Date: \_\_\_\_\_

Business Location: (Cannot be a P.O. Box) \_\_\_\_\_

Home Based Business? No  Yes  \* If YES a Home Occupation Permit must also be filled out and turned in as well.

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ State Sales Tax No. \_\_\_\_\_

Website: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax: \_\_\_\_\_ License #: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Commercial Use Type (see reverse): \_\_\_\_\_ Annual Gross Revenue for the City of Portola: \$ \_\_\_\_\_

Ownership: Corporation  Corp-Ltd Liability  Partnership  Sole Proprietor  Trust  Realty/Broker  Non-Profit

**PERSONAL INFORMATION** – Enter names of Owners, Partners, or Corporate Officers (attach additional sheets, if necessary)

1<sup>st</sup> Owner Name/Title \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Home Address \_\_\_\_\_ Cell No. \_\_\_\_\_

2<sup>nd</sup> Owner Name/Title \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Home Address \_\_\_\_\_ Cell No. \_\_\_\_\_

- Have you filed a Fictitious Business Name Statement?  No  Yes - **If yes, please attach a copy of approved filed FNS.**
- Do you rent the property where this Business will be located?  No  Yes - **If yes, please provide the contact information.**

**Name and Mailing address of Property Owner:**

\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

**APPLICANT MUST COMPLETE ITEMS A –F**

- A. Are any building alterations planned  Yes  No
- B. If yes, have you applied for a building permit?  Yes  No
- C. Have you obtained a sign permit for any new signage?  Yes  No
- D. Will there be outside storage?  Yes  No
- E. Number of available bathrooms \_\_\_\_\_
- F. Is the building fire sprinklered?  Yes  No
- G. Have you contacted the Fire Dept for Inspection?  Yes  No
- H. Do you have sub-contractors or affiliates working in this location?  
 Yes  No - **Please provide information on back of this application.**

*A business license does not authorize any person to conduct any unlawful business or to conduct any lawful business in an illegal manner or conduct the business without strictly complying with all the provisions of the Ordinance of the City of Portola, including but not limited to those requiring a permit from any board, commission, department, or office of the City.*

**I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**REVIEW - OFFICE USE ONLY**

Building: \_\_\_\_\_ Date: \_\_\_\_\_

Planning: \_\_\_\_\_ Date: \_\_\_\_\_

Fire: \_\_\_\_\_ Date: \_\_\_\_\_

Env. Hlth: \_\_\_\_\_ Date: \_\_\_\_\_

Home Occ. Permit Approval Date: \_\_\_\_\_

Solicitor's Permit Required?  Yes  No

License Fee: \$ \_\_\_\_\_

## AFFILIATE INFORMATION

If your business includes affiliates as defined below, please list them below and add the appropriate fee to your business license. Only affiliates who work in the within the Portola City limits are required.

*"Affiliate" means a person who is an independent contractor to another person who holds a valid and current business license in the city, but who performs services similar to that of an employee. Examples include real estate agents who work under a broker with a valid business license, a hair stylist/nail tech working under a salon with a business license and a flooring installer working under a licensed business.*

**Business Name:** \_\_\_\_\_ **Owner:** \_\_\_\_\_

- |          |           |
|----------|-----------|
| 1) _____ | 2) _____  |
| 3) _____ | 4) _____  |
| 5) _____ | 6) _____  |
| 7) _____ | 8) _____  |
| 9) _____ | 10) _____ |

- |  |  |
|--|--|
| <input type="checkbox"/> Adult Oriented Businesses<br><input type="checkbox"/> Animal Sales & Service<br><input type="checkbox"/> Grooming and Pet Stores<br><input type="checkbox"/> Kennels<br><input type="checkbox"/> Veterinary Clinic<br><input type="checkbox"/> Veterinary Hospital<br><input type="checkbox"/> Automotive and Equipment<br><input type="checkbox"/> Automotive Rentals<br><input type="checkbox"/> Automotive Repairs<br><input type="checkbox"/> Automotive Sales<br><input type="checkbox"/> Car Wash and Detailing<br><input type="checkbox"/> Heavy Equipment Rental & Sales<br><input type="checkbox"/> Banks and Financial Services<br><input type="checkbox"/> Bars and Drinking Places<br><input type="checkbox"/> Broadcasting and Recording Studios<br><input type="checkbox"/> Building Material Stores<br><input type="checkbox"/> Business Support Services<br><input type="checkbox"/> Commercial Recreation<br><input type="checkbox"/> Amusement Center<br><input type="checkbox"/> Equipment Repair Light<br><input type="checkbox"/> Specialized Education and Training<br><input type="checkbox"/> Gasoline Sales<br><input type="checkbox"/> Storage Facility<br><input type="checkbox"/> Realty/Broker | <input type="checkbox"/> Full Service<br><input type="checkbox"/> Food & Beverage Retail Sales<br><input type="checkbox"/> Funeral and Interment Services<br><input type="checkbox"/> Lodging Services<br><input type="checkbox"/> Long Term Care Facility<br><input type="checkbox"/> Maintenance and Repair<br><input type="checkbox"/> Medical Service<br><input type="checkbox"/> Neighborhood Commercial<br><input type="checkbox"/> Nursery, Retail<br><input type="checkbox"/> Offices, Professional<br><input type="checkbox"/> Personal Services<br><input type="checkbox"/> Retail Sales & Services<br><input type="checkbox"/> INDUSTRIAL USE TYPES<br><input type="checkbox"/> Laundries, Commercial<br><input type="checkbox"/> General Industrial<br><input type="checkbox"/> Printing and Publishing<br><input type="checkbox"/> Research Services<br><input type="checkbox"/> Wholesaling and Distribution |
|--|--|

### IF YOU DO NOT HAVE AFFILIATES

If you do not have affiliates associated with this business this year, please sign and date the following section stating so. This must be done with every renewal if so.

I, \_\_\_\_\_, hereby state that I /we do not have any Affiliates working for this business this year, within the City of Portola. (Please Print)

Business Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

(Signature Please)



## Business License Fees

\*BUSINESS LICENSE FEE INCLUDES A \$4.00 STATE MANDATED DISABILITY ACCESS AND EDUCATION REVOLVING FUND\*

<u>Annual Gross Receipts</u>	<u>Annual Fee</u>
\$2000- \$50,000	\$ 64.00
\$50,001 – 100,000	\$124.00
\$100,001 – 150,000	\$184.00
More than \$150,001	\$244.00

For businesses with Affiliate Employees

**\$10 per affiliate**

### Home Occupation Permit Fees

Tier A	\$55.00
Tier B	\$140.00
Tier C	\$140.00

\* Tier C requires a Conditional Use Permit; the current fee is \$420.00

Solicitor/Peddler Permit - **\$40.00**

## NEW OR RENEWAL OF BUSINESS TAX APPLICATION

On September 19, 2012 Governor Brown signed into law SB-1186 which adds a state fee of \$1 on any applicant for a local business license or similar instrument or permit, or renewal thereof. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop educational resources for businesses in order to facilitate compliance with federal and state disability laws, as specified. 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](http://www.dgs.ca.gov/dsa/Home.aspx).
- The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov).
- The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).