



CITY OF SAN JACINTO
 595 S. San Jacinto Avenue - San Jacinto, CA 92583
 (951) 487-7330 - FAX (951) 537-6385

- Please Check One*
- New Application
 - Change of Owner
 - Change of Address
 - Change of Business Name
 - HOME OCCUPATION

BUSINESS LICENSE APPLICATION

THE UNDERSIGNED HEREBY REQUESTS A LICENSE TO CONDUCT BUSINESS IN THE CITY OF SAN JACINTO (PLEASE PRINT OR TYPE)

Business Name _____ Corporate Name (if applicable) _____ Business Location _____ <small>(Cannot be P.O. Box per State of California Business & Professions Code-Section 17538.5)</small> _____ Mailing Address _____ _____ Phone No. _____ Fax No. _____ Description of Business _____ Ownership <input type="checkbox"/> Corporation <input type="checkbox"/> Corp-Ltd Liability <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Trust	OFFICIAL USE ONLY
	Business License No. _____ SIC/NAIC CODE _____ HOP or C of O No. _____ APN _____ Case File _____ <input type="checkbox"/> Proof of Workers' Compensation Bus. Start Date _____ Resale No. _____ Federal ID No. _____ State ID No. _____ Consumer Affair No. _____ State Lic. No. _____ State Lic. Type _____ Expire Date _____

Enter below names of Owners, Partners, or Corporate Officers (attach additional sheet, if necessary)

1st Owner Name _____	Title _____	Date of Birth _____
Home Address <small>(Cannot be P.O. Box)</small>		Driver Lic. No. _____
		Soc. Sec. No. _____
Home Phone No. _____	Cell / Pager No. _____	
2nd Owner Name _____	Title _____	Date of Birth _____
Home Address <small>(Cannot be P.O. Box)</small>		Driver Lic. No. _____
		Soc. Sec. No. _____
Home Phone No. _____	Cell / Pager No. _____	

In case of emergency, please contact (attach additional sheet, if necessary)

Contact Name _____	Phone No. _____
Address _____	Cell/Pager No. _____

**IN PREPARATION FOR A FUTURE WEB-BASED RENEWAL PROGRAM,
 PLEASE PROVIDE YOUR E-MAIL ADDRESS.**

No. of Employees Part-time <input style="width: 50px; height: 20px;" type="text"/> Full-Time <input style="width: 50px; height: 20px;" type="text"/>	<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> <p><i>Thank you for doing business in the City of San Jacinto!</i></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Base Fee</td> <td style="width: 30%;"><input style="width: 90%; height: 20px;" type="text"/></td> </tr> <tr> <td>Employee Fee</td> <td><input style="width: 90%; height: 20px;" type="text"/></td> </tr> <tr> <td>State CASp Fee</td> <td style="text-align: center;">\$ 1.00</td> </tr> <tr> <td>Other Fee</td> <td><input style="width: 90%; height: 20px;" type="text"/></td> </tr> <tr> <td>Total Due</td> <td><input style="width: 90%; height: 20px;" type="text"/></td> </tr> </table>	Base Fee	<input style="width: 90%; height: 20px;" type="text"/>	Employee Fee	<input style="width: 90%; height: 20px;" type="text"/>	State CASp Fee	\$ 1.00	Other Fee	<input style="width: 90%; height: 20px;" type="text"/>	Total Due	<input style="width: 90%; height: 20px;" type="text"/>
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For Businesses Located in San Jacinto (please check if interested)

I would like to receive information on how my business can participate in recycling efforts.

This application does not sanction any act not otherwise permitted. Applicant must obtain clearance to conduct business from the Community Development Department and agrees to comply with all sections of the San Jacinto Municipal Code. Applicant is responsible for obtaining a State of California Sales Tax number, if necessary, and providing the City of San Jacinto with such number when issued. Applicant also recognizes responsibility to comply with the workers' compensation provisions of Section 3700 of the Labor Code.

Applicant's Name and Title (please print): _____

Signature of Applicant: _____ Date: _____

RETURN APPLICATION TO ABOVE ADDRESS AND MAKE CHECK PAYABLE TO CITY OF SAN JACINTO.

BUSINESS LICENSE FEE SCHEDULE

<u>Most Businesses</u>	<u>Contractors – Engineering, General, & Misc.</u>
\$70 per year base fee.	Class A \$80* per year base fee
Covers one person (owner, agent, manager	Class B \$80* per year base fee
representative, etc.) Plus graduated scale	Class C \$60* per year base fee
for employees listed below.	Covers one person (owner, agent, manager,
	representative, etc.) *Plus graduated scale
	for employees listed below.

Graduated Scale Basis of Computation for Employee

Whenever the term “graduated scale” is used, it refers to the following basis of license fee computation; and whenever license fee is to be computed on the basis of “graduated scale,” it shall be computed on the basis of the number of employees as follows:

Full time* Employees
Working in San Jacinto

1-2	Employees	\$10.00	Per year
3-6	Employees	\$30.00	Per year
7-10	Employees	\$50.00	Per year
11-14	Employees	\$70.00	Per year
15-20	Employees	\$100.00	Per year
21-30	Employees	\$120.00	Per year
31-40	Employees	\$150.00	Per year
41-50	Employees	\$200.00	Per year
51 or more	Employees	\$200.00	Per year plus \$5.00 for each employee over fifty in number.

*1 Full-Time Employee = 1 employee working 40 hours per week or 3 part-time employees hours each per week.

Determining Number of Employees. The number of employees shall be the average number engaged in the business during the preceding fiscal year or during such portion thereof as the business was in operation. In the case of beginning business, the number shall be estimated by the applicant and the fee paid on the estimation but shall be adjustable to the actual number within thirty days after the close of the year. The application for the business license each calendar year shall correctly set forth the number of employees applicable to the determination of the license fee.

Employee Defined (Self-employment). “An employee” is a person who receives his compensation from an employer who withholds the necessary Federal and State Tax, carries worker’s compensation insurance, and assumes all other responsibilities as an employer. Any person who is not an employee shall be deemed self-employed and in business for himself.