## City of Firebaugh Application for Municipal Business License Effective Date July 01 – Expiration Date June 30



New License□	Renew License□	Itinerant Business License□	LIFORNI
Business Name:			
			Zip:
Mailing Address:	·	City:	Zip:
Business Telepho	one:	Business Description:	
Business Owner'	s Name:	Home Ph	none:
Home Address:_		City	Zip
b. If gross year (as c. If gross	ribed in section 4-1), the bus receipts (as defined by subd described in section 4-1), th receipts (as defined by subd	siness license tax for that fiscal year sivision f of subsection 4-2.1) are betwee business license tax for that fiscal vivision f of subsection 4-2.1) are greater	ween \$50,000.01 and \$100,000.00 during the fiscal year shall be <b>\$100.00</b> . ater than \$100,000.00 during the fiscal year
(as desc	ribed tax in for section th.at	4-1), the business license tax for that <b>Table 1</b>	t fiscal year shall be \$200.00.
Gross Receipts		Tax Fee	
\$1.00 - \$50,000	0.00	\$50.00	
\$50,000.01 - \$1		\$100.00	
Greater Than \$		\$200.00	
*Itinerant Busin	ness	\$500.00 per Quar	ter
<ol> <li>Gross re</li> <li>SB 1186</li> </ol>	Gross Receipt *MUST REPo eceipts tax fee from Table 1 State-mandated disability access ou're your business tax/fee due	ss compliance fee	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Schedule C, Forn statement, or sale All documents su If your business i	m 1065, Form 865, Form 11 es tax returns) from the last of bebuitted will not be returned	20, Form 1120S-S Corp, Form 8825, completed business tax year. The Cite.  a State or County Agency, the City n	of the income tax return for the business (i.e.: Schedule E, profit & loss statement, financial ty does not require a copy of your entire tax return.  nust verify that you possess such a license.
Board of Equaliz	ation #	Federal Tax ID #_	
Social Security #	:	Contractors Licen	se #
Self-Insured Cert	tificate		
☐ CA State Cont☐ CA State Day	th Department Certificate	☐ Bureau of Automotive Re☐ Liability Insurance Certif☐ Workers Compensation C☐ Alcohol Beverage Contro☐ Tobacco License	icate Certificate
Do you sell alcoh Do you sell firear		Do you sell tobacco? □YES □NO	

## For Rental Property License

Number of Rental Units for Rent			
Estimated Annual Gross Receipts	for previous calendar year \$		
	s are subject to an audit per Municipal C	ode Section 4-2.12	
I certify that the above information	n is correct to the best of my knowledge		
Š	, c		
I declare under penalty of perjury	that this is a true, correct, and complete	icense application.	
City Ordinances. Chapter 4-2.3 or carrying on any business under this business required under any other	f the Firebaugh Municipal Code states p is section shall not be relieved from the ordinance of the City and shall remain s	business whose operation would be in versons required to pay a license tax for troayment of any license tax for the privile ubject to the regulatory provisions of oth ory agencies for further information about	ransacting and ege of doing such er ordinances. You
Signature	Title	Date	_
		YOUR FINAL BUSINESS LICENSE A YY OF FIREBAUGH MUNICIPAL COI	
	For City Use O		
Utility Clerk:	APPROVAL:	_ DENIED:	
*Dlagga rafor to Eirahaugh Munici	pal Code 4-2.14 for information regarding	og the Appeal of Poficeal Proceedure	
Doling Dont:	Approved:	Date:	<u>—</u>
Fire Dept.	Approved.	Date:	
Duilding Dont	Approved.	Date:	
Diamar:	Approved:	Date:	
Codo Enforcement:	Approved:	Date:	
	Approved:Approved:	Date: Date:	
PUDLIC WOFKS	Approved:	Date:	