

# City of Firebaugh

## Application for Municipal

### Itinerant Business License

1133 P Street

Firebaugh, Ca. 93622



New License \_\_\_\_\_ Renewal License \_\_\_\_\_ Fiscal Year \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Business Description: \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

#### **Itinerant Business** - Municipal Code 4-2.6.1, Resolution No. 23-51

Any person traveling from place to place to sell or display merchandise, goods, or food, without having a permanent business address within the City limits, or otherwise do business from a temporary structure or movable vehicle, is hereby required to obtain an itinerant business license from the collector at the rate of listed below per vehicle per each quarter of the fiscal year; provided, however, that no such person without a permanent business address within the City limits shall travel from place to place to sell or display merchandise, goods, or food, or otherwise do business from a temporary structure or movable vehicle, without annually presenting to the collector proof that each such vehicle or temporary structure has obtained a health and sanitary inspection tag from the Fresno County Health Department within nine months prior to the itinerant business license renewal and has paid all health department license fees.

#### **Locals: Must show proof you live within city limits**

Duration	License Fee for Locals	Check Box	License Fee for Non-Locals	Check Box
Weekly	\$50.00		\$100.00	
Quarterly	NA		\$500.00	
Yearly	\$500.00		NA	

*\*Please submit verification of County Approved Certification even if it is for a renewal.*

If your business is required to be licensed by a State or County Agency, the city must verify that you possess such a license. Please provide a copy of the certificates listed below, if applicable.

Board of Equalization # \_\_\_\_\_ Federal Tax ID # \_\_\_\_\_

Contractors License # \_\_\_\_\_ Self-Insured Certificate \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> CA Sellers Permit                        | <input type="checkbox"/> Bureau of Automotive Repair License |
| <input type="checkbox"/> CA State Health Department Certificate   | <input type="checkbox"/> Liability Insurance Certificate     |
| <input type="checkbox"/> CA State Contractors License             | <input type="checkbox"/> Workers Compensation Certificate    |
| <input type="checkbox"/> CA State Day Care Provider Certificate   | <input type="checkbox"/> Alcohol Beverage Control License    |
| <input type="checkbox"/> CA State Private Patrol Operator License | <input type="checkbox"/> Tobacco License                     |

Do you sell alcohol?     YES  NO  
 Do you sell firearms?     YES  NO  
 Do you sell tobacco?     YES  NO

I declare under penalty of perjury that this is a true, correct, and complete license application.

NOTICE: Issuance of a business license does not allow you to engage in a business whose operation would be in violation of other City Ordinances. Chapter 4-2.3 of the Firebaugh Municipal Code states persons required to pay a license tax for transacting and carrying on any business under this section shall not be relieved from the payment of any license tax for the privilege of doing such business required under any other ordinance of the City and shall remain subject to the regulatory provisions of other ordinances. You are urged to check with the appropriate City Department and other regulatory agencies for further information about these regulations prior to paying for your licenses.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**THIS IS AN APPLICATION ONLY – “DOING BUSINESS WITHOUT YOUR FINAL BUSINESS LICENSE APPROVAL IS A MISDEMEANOR AND PUNISHABLE BY LAW” PURSUANT TO CITY OF FIREBAUGH MUNICIPAL CODE SEC. 4- 2.25**

For City Use Only

Utility Clerk: \_\_\_\_\_ APPROVAL: \_\_\_\_\_ DENIED: \_\_\_\_\_

\*Please refer to Firebaugh Municipal Code 4-2.14 for information regarding the Appeal of Refusal Procedure

City Manager: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Police Dept.: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Fire Dept.: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Building Dept.: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Planner: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Code Enforcement: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Public Works: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_