



Internal Services Agency

Department of Finance

Tax Collection and Licensing Division

Linda S. Pittman, Assistant Tax Collector

County of Sacramento

Terry Schutten, County Executive
Mark Norris, Agency Administrator
Dave Irish CPA, Department Director

BUSINESS LICENSE APPLICATION

If your business is located in the unincorporated area of Sacramento County and is not exempt from licensing, you require a **General Business License**. If you answer **YES** to any question in Section III, you also require a **Special Business License**. Some businesses will require both types of licenses.

Office Use Only			
Industry Code _____	C/I _____	H/O _____ (circle one)	<input type="checkbox"/> Spec Lic
Received By/Date _____	Processed By/Date _____	Fee \$ _____	
Control/Receipt Number _____	Amount Received \$ _____	Check # _____	
Attached License(s) # _____	License # (s) Closed _____		
NEW LICENSE(s) # _____	Letter Required? <input type="checkbox"/>	Letter Sent By/Date _____	
Parcel # _____	Zone _____		
(TO BE COMPLETED BY PLANNING DEPARTMENT)			
Preliminary Review by: _____	Comments: _____		

SECTION I

PLEASE WRITE LEGIBLY, BE VERY SPECIFIC IN DESCRIBING YOUR BUSINESS AND COMPLETE EACH SECTION WITH A REPLY OR "N/A"

Business Location	<input type="checkbox"/> Commercial/Industrial Location	<input type="checkbox"/> Home Based Business			
Type of Application	<input type="checkbox"/> New License	<input type="checkbox"/> Renewal	<input type="checkbox"/> Change of Owner	<input type="checkbox"/> Change of Business Address	
Ownership Type	<input type="checkbox"/> Sole*	<input type="checkbox"/> Married Couple*	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation/LLC	<input type="checkbox"/> Other (specify) _____
* If owner is a Veteran? <input type="checkbox"/> You may qualify for a fee waiver. Ask for a Claim for Veteran's Waiver of License Fees Form or download from our Webpage at: http://www.finance.saccounty.net/Tax/BusLicForms.asp . Full application fee must be submitted with application and waiver.					
Business Owner's Name (Last, First, MI) <u>OR</u> Name of Corporation/LLC as filed with the Secretary of State's Office.				Business Owner's Phone No.	
Address of Business Owner OR Corporation (Street, City, State, Zip) (No P.O. Boxes or Postal Mail Service Addresses.)				E-mail or Website	
Partner/Corporate Officer Name (Last, First, MI), Title, and Address				Partner/Officer Phone No.	
Partner/Corporate Officer Name (Last, First, MI), Title, and Address				Partner/Officer Phone No.	
Applicant Name (Last, First, MI)		Relationship to Business (Owner, Manager, Accountant, etc.)		Applicant's Phone No.	
<i>If additional partners, please CHECK HERE <input type="checkbox"/> and list on a separate sheet.</i>					
Business Name				Business Phone No.	
Business Site Address (Street, <u>Apt. or Suite #</u> , City, State, Zip) (No P.O. Boxes or Postal Mail Service Addresses allowed)					
Business Mailing Address (If different than site address)					
Type of Business					
Describe all activities, products, types of services, etc. of your business				No. of employees who report to business site:	

PLEASE COMPLETE SECTIONS II and III

COUNTY OF SACRAMENTO BUSINESS LICENSE APPLICATION

SECTION II

A General Business License is required for all businesses located in the unincorporated area of Sacramento County. It is strongly recommended that you contact the Planning and Community Development Department before completing the application and paying for the business license, to make sure the type of business is allowed at the location.

Please answer all questions for activities that will take place at the business site

A. Will the following be dispensed, stored, distributed, used or sold in the normal course of your business activity?	Yes	No
1. Alcoholic beverages?		
2. Concealable firearms or gunpowder?		
3. Tobacco products and/or tobacco paraphernalia? You must also obtain a Tobacco Retailer License add \$294.00.		
4. Over 500 junk tires? If yes, you must also obtain a Junk Tires License.		
B. Do you anticipate the use, storage, or handling of hazardous materials (solvents, fuels, paint, etc.) in your business, which at any one time will exceed the following amounts? (The listed amounts apply regardless of the individual container size.) <input type="checkbox"/> 55 Gallons (Liquids) <input type="checkbox"/> 500 Pounds (Solids) <input type="checkbox"/> 200 Cubic Feet (Gases)		
C. Will your business operations result in the generation of any hazardous wastes (including bio-waste)?		
<i>If you answered "yes" to either question B or C above, will your business be located within 1,000 feet of a school, day care or medical facility?</i>		
D. Will your business offer, provide or otherwise engage in any of the following?		
1. Live music, entertainment, or theatrical presentations?		
2. Dancing? (by customers or public)		
3. Electronic, mechanical, or video games of skill, including Internet based? If yes, number of machines? _____		
4. Pool, billiards, or card tables? If yes, how many tables? _____		
5. Swimming, sauna, steam room, or spa?		
6. Sexually oriented activities, entertainment, books, magazines, videos, novelties or devices?		
<i>If you answered "yes" to question D-6 above, will your business be located within 1000 feet of a residential area, clinic or child-family guidance office, library, public park, church, community center, private or public K-12 school, or indoor or outdoor recreation facility primarily designed to serve persons under age 18?</i>		
7. Service or repair (to include but not limited to smog check or other vehicle servicing or repair, servicing or repairing appliances, electronic equipment, etc.) If yes, what will be serviced or repaired?		
E. Will you be assembling or manufacturing a product? If yes, what type?		
F. If your company uses any vehicles in the business, will the vehicle(s) be stored at this business site? If so, how many and what is the capacity size (e.g., 10,000 pounds)? Number of vehicles on site _____ Capacity size _____ If your company uses any vehicles that will NOT be stored at this business site, please indicate where (business name and/or address) they are kept when not in use:		
G. Will there be any STORAGE of:		
1. Goods, inventory, products and/or equipment <u>owned by you?</u> (Do not include standard office equipment and/or supplies.) If yes, what will be stored at the business?		
2. Automobiles or anything of value NOT owned by your company (i.e., public storage, auto dealer, towing yard)? If yes, what will be stored at the business?		
H. Will customers come into your business to purchase any goods, merchandise or products, including food? If yes, please indicate:	RETAIL	
	WHOLESALE	
I. Will there be any of the following at your business?		
1. Laboratory or any equipment for analysis or processing, including medical diagnostic. If so, please describe:		
2. Machining, fabrication, welding, or other mechanical process. If so, please describe:		
3. Molding, casting, foundry, constructing. If so, please describe:		
J. Will MASSAGE be offered or otherwise available at the business site? If so, please ask for a copy of the County's Massage Establishments & Practitioners Ordinance, Chapter 4.36.		
<i>If you answered YES to ANY question, the fee is:</i>	\$165.00	
<i>If you answered NO to ALL questions, the fee is:</i>		\$140.00

IF YOU ANSWERED YES TO TOBACCO SALES, ADD \$294.00 TO LICENSE FEE

PLEASE CONTINUE – COMPLETE SECTION III

COUNTY OF SACRAMENTO BUSINESS LICENSE APPLICATION

SECTION III

ACTIVITIES REQUIRING A SPECIAL BUSINESS LICENSE

PLEASE ANSWER ALL QUESTIONS

Will your business buy, sell or distribute, offer or otherwise engage in:	YES	NO
1. Concealable firearms or gunpowder		
2. Dancing to which the general public is invited		
3. Pool tables or billiards If Yes, How Many Tables? _____		
4. Storage of automobiles or anything of value <u>not</u> owned by your company (e.g., Public Storage) If so, please explain:		
5. Adult related activities such as escort service, introductory service, modeling studio or service, bathhouse, sexual encounter center *		
6. Antiques		
7. Automobile dismantling		
8. Used auto parts		
9. Mobile auto repairs, car washing or detailing		
10. Circus, carnival, or petting zoo (includes clowns)		
11. Buy or sell metal, including precious and scrap metals		
12. Repossess automobiles		
13. Operate a booth in a flea market or bazaar		
14. Private security <u>street patrol</u> services		
15. Motorcycle sales, including new and used parts		
16. Wrecking yard		
17. Home repair/handyman/landscaping/house cleaning services (Services relating to maintenance, repair or installation at <u>single family residences</u> , either inside or outside)		
<p>Note: A Special Business License is required if you answer yes to this question unless you have a state-issued professional license in good standing, such as a State Contractor's License, Pest Control License, Alarm Bureau License, etc., relating to this type of work. <u>If you hold a state license for this activity</u>, please indicate the type of license, license number, and issuing agency</p> <p>Type of STATE License _____ License Number _____</p> <p>Issued by (Agency) _____ Status _____</p>		
18. Taxicab services, metered taxicab services *		
19. Towing		
20. Card room*-- If Yes, how many tables? _____		
21. Pawn broker		
22. Second hand or used items. If Yes, what percent is of secondhand/used items to total sales? _____		
23. Junk dealer		
24. Hauling of rubbish, including commercial lot cleaner, <u>not</u> regulated by Sac Regional Solid Waste Authority Hauling vehicle make/model/year _____ License Plate # _____		
25. Mobile or itinerant food sales (e.g., ice cream truck, canteen truck, lunch wagon)*		
26. Massage -- If Yes , ask for a copy of the County's Massage Establishments and Practitioners Ordinance, Chapter 4.36.		
<p>*BUSINESS OWNER(S) AND ANYONE WORKING FOR THE BUSINESSES ABOVE INDICATED BY AN ASTERISK (OR STAR) ARE REQUIRED TO OBTAIN AND CARRY WITH THEM A PHOTO ID CARD OR AN EMPLOYEE PERMIT ISSUED BY THE SHERIFF.</p>		

If you answered YES to ANY question in Section III, you are required to obtain a Special Business License and/or an Employee Permit and you must APPLY IN PERSON. All owners, partners or corporate officers are required to be fingerprinted at the Sheriff's Department immediately after the Business License staff enters the Business License application. Since the Sheriff's Department hours can vary, it is recommended that you telephone us in advance for the Sheriff's Fingerprinting Office hours.

The fee for a Special Business License is \$135.00.

The Sheriff's Department will charge a separate, one time \$32.00 fingerprinting fee for the first owner on the license, and a \$59.00 fee for each partner, spouse, or co-owner.

PLEASE READ AND SIGN DECLARATIONS PAGE

DECLARATIONS PAGE

IMPORTANT---PLEASE READ THE INFORMATION BELOW

Business licenses are issued subject in part to the information provided by applicants. Any change in the information provided may invalidate the business license. The General Business License is **NOT TRANSFERABLE** to a new owner, new type of business activity, or location. The Special Business License is **NOT TRANSFERABLE** to a new owner or business activity.

It is the responsibility of all business license applicants to identify and obtain all special permits and approvals required by federal, state, or county regulation. It is also the responsibility of the applicants to comply with all county building and zoning regulations. Failure to do so may invalidate your right to do business in this county and in addition may subject you to penalties and legal sanctions.

NOTE: It is unlawful for any person to knowingly falsify or conceal any fact or make any false or fraudulent statement in any matter within the jurisdiction of any department of the County.

Doing Business without a valid, active Business License is a misdemeanor.

Checks should be made payable to "Sacramento County".

LICENSE AND/OR PERMIT FEES ARE NON-REFUNDABLE.

THE INFORMATION IN THIS APPLICATION IS PUBLIC RECORD.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct:

(Clearly) Print Name

Business Name

Signature

Date