



Planning and Community  
Development  
200 Old Bernal Avenue  
P.O. Box 520  
Pleasanton, CA 94566-0802  
(925) 931-5600 Fax: (925) 931-5483

## APPLICATION TO CONDUCT A BUSINESS IN YOUR HOME

Address of Residence (Business Location):

\_\_\_\_\_  
(Address, City, Zip Code )

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

Mailing Address: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
(if different from residence address) ( Street, City, Zip Code)

Alternate: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_

Name of Person Conducting the Business: \_\_\_\_\_

Describe the business activities that will be conducted in the home (for example: computer work, office work, telephone contacts, art work using water colors/oil paints, needlework):

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

Owner of Property if Other than Applicant: \_\_\_\_\_

I certify that I have read, understand, and will comply with all regulations governing "exempt home occupations" as listed in Section 18.104.020 of the Pleasanton Municipal Code. If, at any time in the future, I can no longer comply with all of these regulations, I shall immediately apply for a Home Occupation Permit or other permit as may be required by the Zoning Administrator.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Applicant's Name: \_\_\_\_\_

**(For Completion by the Planning Department)**

Zoning of Property: \_\_\_\_\_ Approved: \_\_\_\_\_  
(Initials) (Date)

## REGULATIONS TO CONDUCT A BUSINESS IN YOUR HOME

Your business is considered an "Exempt Home Occupation" if it meets the following regulations (per Section 18.104.020, Chapter 18.104, Title 18 of the Pleasanton Municipal Code). Please complete this form and submit it to the Planning Department. If your business cannot meet one or more of these regulations, please contact the Planning Department (925-931-5600) to obtain information regarding the appropriate zoning approval process. You are also required to apply for and obtain a business license.

Please **check each box** and **sign and date below** to indicate that you understand and will comply with the following regulations:

- Only one resident of the dwelling shall be employed in the conduct of the home business.
- The home business shall consist of activities related to office use (computer, telephone, bookkeeping, drafting) and/or the production of minor arts and crafts items.
- No clients or customers shall come to the premises in connection with the home business.
- The home business shall be conducted only in the dwelling and shall be clearly incidental and subordinate to the use of the structure as a residence.
- There shall be no signs displayed or posted on the premises in conjunction with the home business.
- The existence of the home business shall not be apparent beyond the boundaries of the site.
- The residence address shall not be used in any advertising done in conjunction with the home business.
- Materials, stock, supplies, or equipment shall not be delivered to or picked up from the residence in connection with a home business except by the permittee.
- Equipment, materials, and supplies used for the home business shall consist of office-type items (computer, typewriter, desk, files, etc.) and those items used in the production of minor arts and crafts products (yarn, watercolors, oil paints, etc.) and shall not occupy more than one room of the dwelling.
- The home occupation shall not create pedestrian or vehicular traffic in excess of the amount normally generated by residential uses allowed in the district.

I understand and will comply with the regulations indicated above. I also understand that this permit only applies to the address on the front of this form, and if I move from this location, I will need to complete and submit a new "Application to Conduct a Business from Your Home" form and contact the Business License Division (925-931-5440).

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**Applicant's Signature**

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**Date**

**Did you:**      **remember to sign and date page 1 and page 2?**  
                    **remember to describe all of the business activities that will be conducted in the home?**  
                    **review and check all of the boxes for the items on page 2?**

**Good luck in your business endeavor!**



# CITY OF PLEASANTON

200 Old Bernal Ave. P.O. Box 520 Pleasanton, CA 94566  
(925) 931-5440 www.ci.pleasanton.ca.us

DATE & P.O.D  
APPROVAL

## BUSINESS LICENSE TAX APPLICATION

THIS APPLICATION MUST BE FILLED OUT COMPLETELY AND SIGNED BEFORE LICENSE CAN BE ISSUED

<b>BUSINESS ID NO.</b>	<b>ACCOUNT NO.</b>	<b>EXPIRATION DATE</b>
<b>Business Name **</b> _____	<b>**Bus. Phone</b> _____	
<b>Business Location **</b> _____ <small>(Cannot be PO Box per State of California Business &amp; Professions Code Section 17538.5)</small>	<b>Bus. Fax</b> _____	
<b>Mailing Address</b> _____	<b>Website</b> _____	
<b>Description of Business:</b> _____	<b>Email</b> _____	
<b>**OWNERSHIP:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> Ltd. Liability Co. <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Ltd. Partnership <input type="checkbox"/> Ltd. Liability <input type="checkbox"/> Partnership. <input type="checkbox"/> Trust	<b>Start Date</b> _____	
<b>State Contractor Lic. No.</b> _____ <b>Type</b> _____ <b>Expires</b> _____	<b>SIC Code</b> _____	
<b>RESALE NO.</b> _____	<b>FEIN NO.</b> _____	
	<b>SEIN NO.</b> _____	

**\*\* NAME(s), RESIDENTIAL ADDRESS & PERSONAL IDENTIFICATION OF OWNERS & PARTNERS**  
**If CORPORATION With FEIN LIST OFFICERS (no personal identification required)**

<b>Owner Name</b> _____	<b>Title</b> _____	<b>Drivers Lic. No.</b> _____
<b>Address</b> _____ <small>(Cannot be PO Box)</small>		<b>Soc. Sec. No.</b> _____
		<b>Cell/Phone No.</b> _____
<b>Owner Name</b> _____	<b>Title</b> _____	<b>Drivers Lic. No.</b> _____
<b>Address</b> _____ <small>(Cannot be PO Box)</small>		<b>Soc. Sec. No.</b> _____
		<b>Cell/Phone No.</b> _____

**\*\* PROVIDE LOCAL CONTACT INFORMATION**

<b>Name</b> _____	<b>Phone</b> _____
<b>Email Address</b> _____	

**IF CONTRACTOR, COMPLETE THE FOLLOWING**

<b>Project name/address</b> _____	<b>Phone</b> _____
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**AGENT OF SERVICE (if a corporation) Must be in CALIFORNIA**

<b>Name</b> _____	<b>Phone</b> _____
<b>Address</b> _____	

**\*\* MUST BE PROVIDED TO PROCESS APPLICATION**

<b>LICENSE TAX SCHEDULE</b> <table border="1"> <tr> <td><b>Range of Gross Receipts -</b></td> <td><b>Tax -</b></td> </tr> <tr> <td>\$ 0 - \$ 24,999</td> <td>\$25.00</td> </tr> <tr> <td>\$ 25,000 - \$ 99,999</td> <td>\$50.00</td> </tr> <tr> <td>\$100,000 - \$249,999</td> <td>\$75.00</td> </tr> <tr> <td>\$250,000 - AND ABOVE</td> <td>\$.30 per \$1,000 of gross receipts</td> </tr> </table>	<b>Range of Gross Receipts -</b>	<b>Tax -</b>	\$ 0 - \$ 24,999	\$25.00	\$ 25,000 - \$ 99,999	\$50.00	\$100,000 - \$249,999	\$75.00	\$250,000 - AND ABOVE	\$.30 per \$1,000 of gross receipts	<b>PLEASE CALCULATE AMOUNT DUE FROM SCHEDULE ON LEFT OF FORM BASED ON ESTIMATED GROSS RECEIPTS, ENTER FEE IN BOX BELOW AND SIGN</b>  <b>NO. OF EMPLOYEES **</b> <input type="text"/>  <b>ESTIMATED GROSS RECEIPTS **</b> <input type="text"/>  <b>TOTAL TAX DUE</b> <input type="text"/>
<b>Range of Gross Receipts -</b>	<b>Tax -</b>										
\$ 0 - \$ 24,999	\$25.00										
\$ 25,000 - \$ 99,999	\$50.00										
\$100,000 - \$249,999	\$75.00										
\$250,000 - AND ABOVE	\$.30 per \$1,000 of gross receipts										
<b>This license period is for twelve months ending</b> <input type="text" value="12/31/12"/> <b>Estimated Gross Receipts are based on</b> <input type="text"/> <b>months:</b> <b>From</b> <input type="text"/> <b>to</b> <input type="text" value="12/31/12"/>											

**I DECLARE, UNDER PENALTY OF PERJURY, THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT, AND THAT ALL REQUIRED LICENSES ARE IN FULL FORCE AND EFFECT.**

Date \_\_\_\_\_ Signature of Owner or Representative \*\* \_\_\_\_\_

**MAKE CHECK PAYABLE TO "CITY OF PLEASANTON" print representative name**