



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

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

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

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

**** PROVIDE LOCAL CONTACT INFORMATION**

| | |
|----------------------------|--------------------|
| Name _____ | Phone _____ |
| Email Address _____ | |

IF CONTRACTOR, COMPLETE THE FOLLOWING

| | |
|-----------------------------------|--------------------|
| Project name/address _____ | Phone _____ |
|-----------------------------------|--------------------|

AGENT OF SERVICE (if a corporation) Must be in CALIFORNIA

| | |
|----------------------|--------------------|
| Name _____ | Phone _____ |
| Address _____ | |

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

| | | | | | | | | | | | |
|--|--|--------------|------------------|---------|-----------------------|---------|-----------------------|---------|-----------------------|--|--|
| LICENSE TAX SCHEDULE <table border="1"> <tr> <td>Range of Gross Receipts -</td> <td>Tax -</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> | Range of Gross Receipts - | Tax - | \$ 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 | PLEASE CALCULATE AMOUNT DUE FROM SCHEDULE ON LEFT OF FORM BASED ON ESTIMATED GROSS RECEIPTS, ENTER FEE IN BOX BELOW AND SIGN NO. OF EMPLOYEES ** <input type="text"/> ESTIMATED GROSS RECEIPTS ** <input type="text"/> TOTAL TAX DUE <input type="text"/> |
| Range of Gross Receipts - | Tax - | | | | | | | | | | |
| \$ 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 | | | | | | | | | | |
| This period is <input type="text"/> to <input type="text"/> 12/31 Estimated Gross Receipts are based on <input type="text"/> months: From <input type="text"/> to <input type="text"/> 12/31 | | | | | | | | | | | |

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