

CITY OF RANCHO CUCAMONGA

10500 Civic Center Drive - Rancho Cucamonga, CA 91730 Tel: (909) 919-2948 - Fax: (909) 919-2959

www.CityofRC.us

BUSINESS LICENSE APPLICATION

(Please print or type clearly, using ink)

PLEASE NOTE: The Business Section of this application is Public NOTE: Incomplete applications will not be processed. Post Office boxes or Post	tal Contract Stations will not be accepted for	START DATE:				
Business or Residential Addresses unless a completed United States Postal Service Business Name (DBA):	ce (USPS) Form 1583 is submitted.	OFFICIAL USE ONLY				
Business Name #2:		BUSINESS LICENSE NO.:				
Business Location:		RECEIPT NO.:				
(If PO Box then USPS Form	7:	PAYMENT DATE:				
submitted)		BATCH NO.:				
Mailing Address		DATE ENTERED:				
(If Different than Business Location)	7:	DATE RECEIVED:				
City State _	Zip	RECEIVED BY:				
Please Note: It shall be unlawful for any packaging supplier in the City of Rancho Cucamonga to store, sell or provide Chloro Fluoro Carbons processed packaging within						
the City of Rancho Cucamonga. Granting of this license does not authorize the holder to violate or cause violation of any existing Covenants, Conditions and Restrictions. Type of Business Retail Wholesale Contractor/Developer Service Professional Manufacturing Administrative Headquarters						
Type of Business (Select one only) Retail Wholesale Contractor/Developer Service Professional Manufacturing Administrative Headquarters Non-Profit Organization Warehouse Delivery Vehicle With No Fixed Place of Business in the City Property Rental Entertainment/Amusements						
_ · · ·	NPDES Permit Requirements:					
	•	regulated industry with storm water discharge				
	•	le SB205 NPDES permit program? Yes No.				
Sic code.	If yes, please provide the NPDES/WDID # and SIC # below.					
	NPDES / WDID Permit #					
Seller's Permit No.: FEIN: No. of Employees:	SIC#					
Per AB 2184, you may protect your residential address by providing a different Service of Process address in accordance with Sections 16000.1(a)(2) and 16100.1(a)(2) of the Business and Professions Code. To do so, please fill out the section below. SERVICE OF PROCESS ADDRESS, PURSUANT TO AB 2184 - AVAILABLE FOR PUBLIC INSPECTION If you wish to protect your residential address with a different service of process address, please provide it here. NOTE - if your service of process address is a post office box or private mailbox, it must comply with paragraph(2) of subdivision (b) of Section 17538.5 of the California Business and Professions Code. Service of Process Address						
Residential Address to protect Business Location	☐ Mailing Address ☐	Owner/Partner/Officer Address				
PERSONAL INFORMATION (CONFIDENTIAL): Enter below names of Owners, Partners or Corporate Officers. Use Additional Sheets as necessary. Ownership Corporation Limited LiabilityCorp. Partnership Ltd Partnership Sole Proprietor Trust Non Profit						
Owner Name Title Phone ()						
Home Address	City State Zip					
Social Security No. or Individual Taxpayer ID No. (ITIN) or Driver's License No. or other ID						
	Title Phone ()					
	City					
SSN/ITIN DLN/Other ID No Cell Phone ()						
Social Security No. or Individual Taxpayer ID No. (ITIN) or Driver's License No. or other ID						
PROPERTY OWNER DECLARATION (MUST BE COMPLETED)	BUSINESS OWNER DECLARATIO	N (MUST BE COMPLETED)				
I declare that, I am the owner, I legally represent the owner, of real property involved in this application and do hereby consent to the filing of this Business License application.	Acceptance of payment does not constitute approval of a Business License. Authorization to conduct business is not granted until license is issued. I declare, under penalty of perjury that this application is true and correct to the best of my knowledge and belief. I understand and agree that the granting of this Business License requires my compliance with all applicable City of Rancho Cucamonga Municipal Code provisions, state, local, federal laws, and all conditions set forth above.					
Signature:Date:Date:	Signature: Date:					
Name (type or print):	Name (type or print):					

BUSINESS LICENSE APPLICATION - SCHEDULE OF LICENSE TAX						
	ment is based on your estimated gross receipts en you report your actual gross receipts.	s (or payroll) for a 12-me	onth period. This amou	unt will be adjusted at renewal		
Box 1: Enter your estimated gross receipts for a 12-month period commencing with the first day of business.			\$	\$		
	*Find your business type on the table below and cl	neck the box that correspor	nds with the amount in Bo	ox 1.		
Box 2:	Enter the amount from Column A of the same lin	e on the table your selected	i. \$			
Box 3:	Subtract Box 2 from Box 1.		\$			
Box 4:	Enter the amount from column B of the same Lin	e.	\$			
Box 5:	Multiply Box 3 by Box 4.		\$			
Box 6:	6: Enter the amount in Column C of that same Line.		\$	\$		
Box 7:	Add Box 5 and Box 6.		\$			
Box 8:	LICENCE FEE AMOUNT		\$			
- OFFICIAL USE ONLY -						
Е	nter the amount from Box 8 below (1027) \$		Home Occupation Pe	17		
	Penalty (1040/1041): 50% (if applicable) \$			(1013)		
	AB 1379 State Fee (1030) \$		Technology Fo	ee (1078) \$		
	Zoning Review Fee (1013) \$		TOTAL AMOU	NT DUE \$		
	eral and state law, compliance with disability access laws is a ne public. You may obtain information about your legal oblig					
Architect a	t www. dgs.ca.gov/dsa, The Department of Rehabilitation at www.dor.		on Disability Access at www.ccda.			
1. RETA	AIL, WHOLESALE, MISCELLANEOUS - GROS	S RECEIPTS A	В	С		
\$	0 to \$ 25,000	0	0	\$ 23.00		
	25,001 to \$100,000	25,000	.0006	\$ 23.00		
	100,001 to \$500,000	100,000	.0003	\$ 68.00		
	500,001 and over TRACTORS, OWNER/BUILDER, SERVICES, P	500,000	.00015	\$188.00		
2. CON	TRACTORS, OWNER BUILDER, SERVICES, P	A	B	C		
	0 to \$ 100,000	0	.0009	\$ 20.00		
	100,001 to \$750,000	100,000	.0004	\$110.00		
	750,001 and over	750,000	.00025	\$370.00		
3. PRO	FESSIONAL AND SEMI-PROFESSIONAL - GRO	OSS RECEIPTS A	В	С		
\$	0 to \$ 25,000	0	0	\$ 23.00		
	25,001 to \$100,000	25,000	.0012	\$ 23.00		
\$	100,001 to \$500,000	100,000	.0005	\$113.00		
\$:	500,001 and over	500,000	.0002	\$313.00		
4. MAN	UFACTURING, ADMINISTRATIVE HEADQUA	ARTERS, WAREHOUSIN				
•	0 to \$ 100,000	A 0	B .0006	C \$ 20.00		
	100,001 to \$1,000,000	100,000	.00025	\$ 80.00		
	1,000,001 and over	1,000,000	.00023	\$305.00		
Ψ	1,000,001 and 0.01	1,000,000		Maximum Due \$1,000.00		
5. DELIVERY VEHICLES - GROSS INVOICES/RECEIPTS IN RANCHO CUCAMONGA						
J. DELI	IVERT VEHICLES- GROSS INVOICES/RECEIP	A A	B	C		
\$	0 to \$ 10,000	0	0	\$ 36.00		
\$	10,001 and over	10,000	.0006	\$ 36.00		
	ERTAINMENT AND AMUSEMENT- GROSS RE	ECEIPTS A	В	C		
	0 to \$ 100,000	0	.0018	\$ 20.00		
\$	100,001 and over	100.000	.001	\$ 200.00		