The Business License application, when completed, provides information to city departments responsible for protecting the health, safety and welfare of the community.

Business License applications are available at the Community Development Department located in City Hall at 1110 West Capitol Avenue, 2nd Floor, West Sacramento, CA 95691. You may also download a PDF copy or submit an electronic application online at www.cityofwestsacramento.org. This application has several exhibits which may not be applicable to all business, depending upon the nature of the business.

After receiving a completed application and processing fee, the Community Development Department will officially begin the application process. To be considered complete, the application and all appropriate exhibits must be completed in their entirety. Business license fees are as follows:

<table>
<thead>
<tr>
<th></th>
<th>Commercial/Industrial</th>
<th>Non-Local</th>
<th>Home Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business License Fee</td>
<td>$76</td>
<td>$76</td>
<td>$50</td>
</tr>
<tr>
<td>SB1186 Fee</td>
<td>$4</td>
<td>$4</td>
<td>$4</td>
</tr>
<tr>
<td><strong>TOTAL DUE</strong></td>
<td><strong>$80</strong></td>
<td><strong>$80</strong></td>
<td><strong>$54</strong></td>
</tr>
</tbody>
</table>

The Community Development Department routes copies of the business license application to appropriate city departments and, sometimes, to other regulatory agencies. These may include Planning, Fire, Building, Code Enforcement, and Yolo County Environmental Health. Review by these departments may indicate (1) that no further information is necessary at this time, (2) that a physical inspection of the business premises is required, or (3) that an applicant must obtain other permits, licenses or additional regulatory approvals.

**PLEASE NOTE:** Under federal and state law, compliance with disability access is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:
- The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx
- The Department of Rehabilitation at www.rehab.cahwnet.gov
- The California Commission on Disability Access at www.cccda.ca.gov

**Special Caution:** The issuance of a Business License is not necessarily the only permit, license, certificate and entitlement for use required by the city’s ordinance and other laws. For example, you may be required to obtain a building permit, certificate of occupancy or use permit. You are responsible for ensuring that all necessary permits, licenses, certificates and entitlements have been obtained.
Community Development Department
1110 West Capitol Avenue
West Sacramento, CA 95691
(916) 617-4645

BUSINESS LICENSE APPLICATION

Home Occupation

Business License #: ____________________________
NAICS Code: ________________________________

Application for:  □ New Business License  □ Renewal  □ Change of Ownership  □ Address Change/Update Records
Ownership Type:  □ Corporation  □ Limited Liability Corporation  □ Partnership  □ Sole Proprietor

Business Name: __________________________________________

Business Location: ________________________________________
(Physical Address; State, Zip Code, No P.O. Boxes)

Business Phone: (____)_________________ Email Address: __________________________

Business Mailing Address (if different): __________________________________________

Owner/Corp. President: ___________________________ Phone: (____)_________________

Driver’s License or Identification Number & Expiration Date: __________________________

Owner Address: ________________________________________________________________

Second Owner / VP: __________________________________ Phone: (____)________________

Manager: ___________________________________________ Phone: (____)________________

Federal ID No. (FEIN): ___________________________ State ID No. (SEIN): ____________

Please provide a detailed description of proposed business: __________________________________________

What was the previous use and who was the previous tenant? ________________________________

Type of Business:  □ Wholesale  □ Retail - Please provide Resale Number: __________________

□ Contractor - Please provide CSLB #: __________________________

□ Manufacturing  □ Mobile  □ Other

Professional License No. __________________________

Gross receipts for this location (estimated): ___________  # of employees (excluding owners)____

Do you have an additional location in West Sacramento that is part of this business?  □ Yes  □ No
If yes, list address: ________________________________

Did you have a previous location in West Sacramento for this business?  □ Yes  □ No
If yes, list address: ________________________________

I declare under penalty of perjury that, to the best of my knowledge, the information provided herein on this application is true and correct. I understand that if issued a Business License, I will conduct business in a lawful manner and will obey the laws of the United States, the State of California and the City of West Sacramento, and that in conducting said business, said license is subject to suspension for violation of laws and ordinances.

Applicant’s Signature ____________________________ Date __________________________

Revised 4/5/2016
The City's Zoning Ordinance was adopted to "promote and protect the public health, safety, morals, comfort, convenience and general welfare"; and to "provide a plan for sound and orderly development and to ensure social and economic stability. Accordingly, all applicants of businesses occupying real property within the City shall complete this Exhibit A so that Community Development can review the proposed use for compliance with the Zoning Ordinance.

BUSINESS USE

1. Will the business serve food or drink intended for human consumption? ☐ Yes ☐ No
2. Will alcoholic beverages be served or sold? ☐ Yes ☐ No
   If yes, please provide ABC License No.
3. Will tobacco or tobacco products be sold? ☐ Yes ☐ No
   (If yes, a tobacco retailer permit may be required. See Municipal Code Chapter 9.30.)
4. Will the business dispense or provide for drugs, drug treatment, narcotics or controlled substances? ☐ Yes ☐ No
5. Will the business devote or intend to devote 25% or more of its merchandise or floor area to adults-only, X-rated or sexually-oriented material? ☐ Yes ☐ No
   (If yes, please contact the Community Development Department as certain zoning requirements may apply.
   See Municipal Code Chapter 17.46.)
6. Will the business sell or store firearms, ammunition, or explosives? ☐ Yes ☐ No
   If yes, please provide Federal Firearms License No.
7. Will the business be conducted entirely out of a house or apartment? ☐ Yes ☐ No
8. Will the business involve the storage of any materials outside of enclosed buildings? ☐ Yes ☐ No
   If yes, please explain:
9. Is the outdoor storage area screened from view from the public street? ☐ Yes ☐ No
10. Will the business or any equipment used in the business generate dust, noise, or glare beyond the property line? ☐ Yes ☐ No
    If yes, please explain:
11. Will the business engage in, carry on, or permit any kind of massage? ☐ Yes ☐ No
    (If yes, a massage permit may be required. See Municipal Code Chapter 17.46.)
12. Will the business generate organic waste? (Defined as food, landscape, and wood waste) ☐ Yes ☐ No
    If yes, how much organic waste is generated per week? (i.e., 10 lbs, half a dumpster load, etc.): ______

FACILITIES

1. Will any new structures be built or existing structures expanded or remodeled with the establishment of this business? (If yes, please contact the Building Dept. for permit requirements) ☐ Yes ☐ No
2. Billiards, card games or bingo (separate license required)? ☐ Yes ☐ No
3. Swimming, sauna, steam room, spa, massage or other health club use? ☐ Yes ☐ No
4. Guard dogs; burglar, intrusion, fire, or robbery alarms; separate security personnel? ☐ Yes ☐ No
5. Will the business have any form of live, electronic, or other indoor entertainment? ☐ Yes ☐ No

I declare under penalty of perjury that, to the best of my knowledge, the information provided on this application is true and correct.

Applicant's Signature: __________________________  Relationship to business: __________________________

Date: __________________________

Revised 10/1/11
The West Sacramento Fire Department administers fire and life safety regulations for all properties located within the city limits of West Sacramento. Permits must be obtained from the Fire Department for special events, public assembly occupancies, storage or use of hazardous materials, hazardous operations such as hot work and spray finishing, storage of high-piled combustible materials and a wide variety of other activities where a fire or life safety hazard may exist. This exhibit also helps the City identify those businesses that may require a Waste Water Discharge Permit in accordance with the City of West Sacramento’s Municipal Code.

LOCAL BUSINESSES ONLY:
In order to assist you in determining whether a fire permit is required for your business, please see the list below of different types of operations that may require permits and inspections from the Fire Department. Please mark the box that best indicates the type of business you will be conducting (check all that apply):

- Automotive repair
- Child Care
- Home Office
- Manufacturing
- Office
- Residential Care Facility
- Retail Sales
- Restaurant or Dining Establishment
- Warehousing

ALL BUSINESSES:
As part of the business identified on this application, I may be conducting one or more of the following within the City of West Sacramento (check all that apply):

- Storage or use of compressed gases (i.e. propane, oxygen, acetylene, argon, helium, etc.)
- Storage or use of hazardous materials (i.e. any type of fuel, kerosene, solvent, detergent, cleaner, corrosive, aerosol, explosive, radioactive material, etc.)
- Storage of materials at or above 12 feet in height
- Welding, grinding, cutting, or other hot work operations
- Spray painting
- Use of industrial ovens
- None of the above

The City of West Sacramento has adopted the 2010 California Fire Code, Title 24, Part 9 of the California Code of Regulations along with local amendments. If you have any questions regarding this application or requirements contained in the 2010 California Fire Code please contact the Fire Prevention Division at (916) 617-4600 or go to our website at: http://www.cityofwestsacramento.org/city/depts/fire/prevention/default.asp.

Do you store any of the following (check all that apply):

- Chemicals
- Petroleum Oils
- Fuels
- Cleaners
- Hazardous Materials
- Solvents

Does your facility have any of the following (check all that apply):

- Warehouse
- Floor Drains
- Vehicle Maintenance
- Steam Cleaner
- Cooling Tower
- Cafeteria Services
- Outside Storage
- Vehicle Wash Rack
- Fuel Islands
- Pressure Washer
- Boiler

Any other information related to your sewer discharge:

Number of employees:

Any shift work?  Yes  No

Contact Name and Title (Please Print):

I declare under penalty of perjury that, to the best of my knowledge, the information provided on this application is true and correct. Purposely falsifying information on this questionnaire carries civil and criminal liability of up to $25,000 under the California Government Code relating to Sanitation.

Signature of Owner:  Date:

Revised 10/1/11
Section 17.41.010 of the Municipal Code provides that the primary use of a property may be augmented by additional subsidiary uses that are part of and normally associated with that primary use. Accordingly, under certain circumstances, home occupations are permitted in residential use. The purpose of this form is to help determine if these circumstances apply.

Complete description of the business activity (attach separate page if needed) ____________________________________________________________

Home occupation businesses are accessory uses (incidental to and secondary to the primary residential use of the dwelling) and must meet the following criteria:

- Is confined within the residence and does not occupy more than fifty percent (50%) of the gross floor area of one floor
- Is operated by members of the family occupying the residence
- Produces no evidence of its existence in the external appearance of the dwelling premises, or in the creation of noise, smoke, pedestrian or vehicular traffic, or other nuisances to a degree greater than normal for the neighborhood

If the proposed home occupation business meets all the above listed requirements, please complete the remainder of this form and return it with your business license application.

1. Will any portion of the business be conducted out of doors? ☐ Yes ☐ No
   If Yes, please explain ____________________________________________________________

2. Is this a home office for a mobile business that is primarily performed offsite? ☐ Yes ☐ No
   If Yes, please explain ____________________________________________________________

3. Will this business require any additions or extensions to the dwelling? ☐ Yes ☐ No
   If Yes, please explain ____________________________________________________________

4. If this business produces materials for sale, resale, or distribution, how will such sales and/or distribution be handled? ____________________________________________________________

5. List any other businesses operated out of this residence: ____________________________________________________________

I understand that this home occupation must meet the requirements of the City Zoning Ordinance, the Building Official, Fire Department, Yolo County Health Department, and Code Enforcement. I hereby certify that the home occupation complies with the criteria identified above and that information provided for the above items is true to the best of my knowledge.

Signature of Owner ___________________________________ Date ____________________________

Revised 1/1/10
# Commercial Facilities (Business) Located in Private Residences (Homes)

## Applicant Information

<table>
<thead>
<tr>
<th>Project Address</th>
<th>Business License and/or Permit No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Owners Signature</th>
<th>Total Construction Cost (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

When a commercial facility (Business) is located in a private residence, that portion used exclusively in the operation of the commercial facility (Business) or that portion used both for the commercial facility (Business) and for residential purposes is covered by the new construction and alterations requirements of the 2013 California Building Code (CBC), Chapter 11B, Section 11B-245.

The portion of the residence used exclusively as a residence is not required to be accessible in accordance with Chapter 11B.

The accessible portion of the residence extends to those elements used to enter the commercial facility, including the front sidewalk, if any, the door or entryway, and hallways; and those portions of the residence, interior or exterior, available to or used by employees or visitors of the commercial facility (Business), including restrooms. Elements that are required access:

1.1. An accessible building entrance and an accessible path of travel to this entrance from either the public sidewalk or the disabled parking stall, if either is existing or installed as part of the work.

1.2. An accessible route of travel from the accessible entrance to the area used for commercial use.

1.3. An accessible restroom serving the area used by employees or visitors.

**Alterations solely** for the purpose of barrier removal undertaken pursuant to the requirements of the Americans with Disabilities Act (Public Law 101-336, 28 C.F.R., Section 36.304) or the accessibility requirements of the 2013 CBC as those regulations now exist or are hereafter amended shall be limited to the actual scope of work for the project. (Alterations made for the purpose of making the business accessible and usable by a person with a disability.)

**Technically infeasible** (as defined in Volume 1, Chapter 2 of the 2013 CBC). If the Building Official determines compliance with applicable requirements is technically infeasible per the 2013 California Building Code, section 11B-202, the alteration shall nevertheless provide equivalent facilitation or equal accommodation for a person with disabilities as for the able bodied. Compliance with these requirements will be to the maximum extent feasible. The details of the finding that full compliance with the requirements is technically infeasible shall be recorded and entered into the files of the City of West Sacramento Building Department.

**The technically infeasible exception does not relieve the responsible parties from complying with the Federal American with Disabilities Act (ADA).** An area of alteration itself may not be exempted.

<table>
<thead>
<tr>
<th>Name of Design Professional (if applicable)</th>
<th>Signature</th>
</tr>
</thead>
</table>

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F:\Community Development\BUSINESS LICENSES\Original Forms\Application Packets\Home Occupation Packet\Page 7: Commercial Facilities Located in Private Residence Form.docx
**ENVIRONMENTAL HEALTH LAND USE REVIEW SURVEY**

A Building Permit Application may require a review from Yolo County Environmental Health (YCEH) to ensure the compliance with County, State and Federal laws and regulations. Please complete this survey and answer questions pertaining to each YCEH unit to the best of your knowledge, and submit it as part of your complete application. This survey should be completed by the property owner or the business operator.

<table>
<thead>
<tr>
<th>Site address:</th>
<th>City:</th>
<th>Zip code:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existing business? □ Yes □ No</td>
<td>If yes, name of business:</td>
<td></td>
</tr>
<tr>
<td>Property and/or owner of business name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone number:</td>
<td>Email:</td>
<td></td>
</tr>
<tr>
<td>Mailing address:</td>
<td>City:</td>
<td>Zip code:</td>
</tr>
</tbody>
</table>

**Building Permit #:**

**Project Description:** (Please describe this building permit project as specifically as possible; such as "New house" or "Remodeling a house for use as an Office").

---

<table>
<thead>
<tr>
<th>EH Program</th>
<th>Environmental Health Questions:</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Why is this asked?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ALL</strong></td>
<td><strong>Is this project for a commercial use?</strong></td>
<td></td>
<td></td>
<td></td>
<td>Some EH programs regulate only commercial facilities.</td>
</tr>
<tr>
<td><strong>SEPTIC SYSTEM:</strong></td>
<td><strong>Is a building/structure getting bigger; is the footprint of a building/structure is expanding out of the original footprint?</strong></td>
<td></td>
<td></td>
<td></td>
<td>Septic setbacks are required with adequate replacement area</td>
</tr>
<tr>
<td>If on City Sewer System, check here: □</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Septic setbacks are required with adequate replacement area</td>
</tr>
<tr>
<td>* Go to next EH Program. ONLY answer questions if a septic system exists on parcel - OR – the parcel will be serviced by a future septic system:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Needs to meet septic installation requirements</td>
</tr>
<tr>
<td>Will this project include adding a structure/building/foundation to the land that will be an additional footprint?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Will this project have a wastewater flow or will it alter the existing wastewater flow?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Will this project change the wastewater flow in any way (decrease or increase)?  
For example, adding bedrooms or potential sleeping rooms, or changing the use of the structure, such as residential to commercial |  |  |  |  | This will affect the existing septic system, and the system will need to be evaluated. |
| Grading permits only: will the project have an impact on the existing soils on the parcel? |  |  |  |  |  |
| Is there an unused septic system on this parcel? |  |  |  |  | Abandonment under permit is required. |

---

Environmental Health Land Use Survey 1 of 3 | Page
<table>
<thead>
<tr>
<th><strong>EH Program</strong></th>
<th><strong>Environmental Health Questions:</strong></th>
<th><strong>YES</strong></th>
<th><strong>NO</strong></th>
<th><strong>N/A</strong></th>
<th><strong>Why is this asked?</strong></th>
</tr>
</thead>
</table>
| **WELL / WATER USE:** | Will this project replace one structure for another that already has a well service connection?  
For example, replacing a modular home with a new modular home. |  |  |  | If it is on city water, not an EH issue. |
| If on City Water System or another approved Public Water System, check here: ☐ * | Will this project use an existing well service connection to the structure?  
For example, remodeling a house or other structure that is already connected to the well. |  |  |  | No need for EH review if there is an existing service connection |
| | Will this project require new piping to connect from a well or well water line to the project (i.e., a new connection)?  
- Will there be 15 or more buildings or physical structures supplied by this well?  
- Will there be 5-14 buildings or physical structures supplied by this well?  
- Does this well serve 25 or more people daily, at least 60 days per year (can be non-consecutive days)?  
- Does the water system serve 25 or more year-long residents (year-long residents is at least 183 days/year)? |  |  |  | The well should have an approved permit; if not, the well requires evaluation. |
| | Is there an unused water well on this parcel? |  |  |  | There could be public water system or state small water system requirements. |
| **SOLID WASTE:** | Will this project, or does activity on this parcel, result in handling yard trimmings, untreated wood wastes, natural fiber waste, or construction and demolition wood waste?  
- If yes, will these materials be managed in a way which would allow them to reach 122 degrees Fahrenheit (i.e., composting, excessive storage times, etc.)? |  |  |  | Abandonment under permit is required after 1 year of non-use. |
| **FOOD:** | Will this project, or does activity on this parcel, result in retail food facility activities?  
"Retail" means handling food for dispensing or sale directly to the consumer or indirectly through a delivery service. For example: storing, preparing, packaging, serving, vending or otherwise providing food (any edible substance incl. beverage and ice) for human consumption at the retail level. |  |  |  | Permit required, including a plan check prior to building permit issuance. |
| **POOL/SPA:** | Will this project result in a public pool/spa?  
A public pool/spa includes but is not limited to pools/spas located at hotels, motel, parks, apartments, schools, health clubs, etc. |  |  |  | Permit required, including a plan check prior to building permit issuance. |
<p>| <strong>BODY ART:</strong> | Will this project, or does activity on this parcel, result in tattooing, body piercing, or permanent cosmetics activities? |  |  |  | Permit required, including a plan check prior to building permit issuance. |
| <strong>WASTE TIRE:</strong> | Will this project, or does activity on this parcel, result in generating waste tires onsite? |  |  |  | Permit required |
| | Will this project, or does activity on this parcel, result in hauling 10 or more waste tires at a time? |  |  |  |  |</p>
<table>
<thead>
<tr>
<th>EH Program</th>
<th>Environmental Health Questions:</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Why is this asked?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>HAZARDOUS MATERIALS:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
|            | 1. Will this project, or does any activity on this parcel, result in the handling or storing of any hazardous materials in a commercial capacity? *<br>
  *Please note: a hazardous material is a chemical that is flammable, corrosive, reactive or toxic. This could include organic pesticides.* |     |    |     | May be required by State law to submit a Hazardous Materials Business Plan to YCEH. Failure to comply with this requirement could result in fines of up to $2000.00/day. Business plans must be filed by going to the California Environmental Reporting System (CERS) website cers.calepa.ca.gov, creating an account, entering required hazardous materials information, and submitting the information for approval by YCEH. For assistance with CERS, or any other hazmat questions, call our office at 530.666.8646 and ask for a hazmat specialist. |
|            | 2. Will this project or does activity on this parcel generate hazardous materials waste in a commercial capacity? *<br>
  *For example, used oil.* |     |    |     |                   |
|            | **Supplemental Hazardous Materials questions:**<br>
  *If you answered “yes” to #1 or #2 of the above HM questions, answer a) through i) questions below.*<br>
  *If you answered “no” to #1 or #2 of the above HM questions, mark N/A.* |     |    |     |                   |
|            | a) Will you be handling hazardous materials in quantities greater than 500 pounds, 55 gallons or 200 cubic feet of compressed gas? |     |    |     |                   |
|            | b) Will you be repairing or maintaining motor vehicles or motorized equipment? |     |    |     |                   |
|            |   • If yes, will your facility handle any of the following: motor oil, gasoline, grease, antifreeze, hydraulic oil, and/or diesel? |     |    |     |                   |
|            | c) Will you have an above ground storage tank? |     |    |     |                   |
|            | d) Will you be selling motor vehicle fuel? |     |    |     |                   |
|            |   • If yes, will you have an underground storage tank? *<br>  *Note: Tanks require a plan review.* |     |    |     |                   |
|            | e) Will you be engaging in welding operations? |     |    |     |                   |
|            |   • If yes, will you be handling more than one cylinder of acetylene, oxygen, shielding or other welding gasses? |     |    |     |                   |
|            | f) Will you be operating forklifts? |     |    |     |                   |
|            |   • If yes, will you be storing more than one extra cylinder of propane? |     |    |     |                   |
|            | g) Will you be storing batteries with 55 gallons or more of acid? |     |    |     |                   |
|            | h) Will you be engaging in photography? |     |    |     |                   |
|            |   • If yes, will you be generating photographic waste fluid? |     |    |     |                   |
|            | i) Will you be engaging in x-ray processing? |     |    |     |                   |
|            |   • If yes, will you be generating x-ray processing waste fluid? |     |    |     |                   |
|            | 3. Are there unused/abandoned hazardous materials storage containers on this site? *For example, above-ground tanks or underground tanks or barrels.* |     |    |     | Permit required for abandonments. |

I hereby certify that the information given in this Yolo County Environmental Health Land Use Survey document is true and correct to the best of my knowledge:

Signature: ___________________________ Date: ________________
Print Name: ___________________________ Title: ________________
# ADDITIONAL LICENSING INFORMATION

<table>
<thead>
<tr>
<th><strong>Resale Number</strong>&lt;br&gt;It is mandatory that you contact the State Board of Equalization if your business is required to collect State of California Sales Tax.</th>
<th>State Board of Equalization&lt;br&gt;3321 Power Inn Road, Suite 210&lt;br&gt;Sacramento, CA 95826&lt;br&gt;916-227-6700</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>State Employers Id Number (SEIN)</strong>&lt;br&gt;If you have employees for whom you withhold payroll taxes, you are required to obtain a State Employers Identification Number.</td>
<td>916-654-8706</td>
</tr>
<tr>
<td><strong>Federal Employers Id Number (Fein)</strong>&lt;br&gt;If you have employees for whom you withhold payroll taxes, you are required to obtain a Federal Employers Identification Number.</td>
<td>Internal Revenue Service&lt;br&gt;4330 Watt Avenue&lt;br&gt;North Highlands, Ca 95660&lt;br&gt;1-800-829-3676</td>
</tr>
<tr>
<td><strong>Sacramento Licensing</strong>&lt;br&gt;If your business travels into the City or County of Sacramento, it is necessary to contact them regarding any necessary additional listing.</td>
<td>City of Sacramento&lt;br&gt;Department of Revenue&lt;br&gt;915 I Street, #1214&lt;br&gt;Sacramento, CA 95814&lt;br&gt;916-808-5852&lt;br&gt;Sacramento County&lt;br&gt;Business License Division&lt;br&gt;700 H Street, #1710&lt;br&gt;Sacramento, CA 95814&lt;br&gt;916-874-6644</td>
</tr>
<tr>
<td><strong>Yolo County Licensing</strong>&lt;br&gt;Businesses within the city limits of West Sacramento do not need a county license unless their business is also conducted in the unincorporated area of Yolo County.</td>
<td>Yolo County Planning &amp; Public Works&lt;br&gt;292 West Beamer Street&lt;br&gt;Woodland, CA 95695&lt;br&gt;530-666-8775</td>
</tr>
<tr>
<td><strong>Fictitious Business Name</strong>&lt;br&gt;Businesses not using the owner's legal last name in the title of the business must file for a fictitious business name.</td>
<td>Yolo County Clerk Recorder&lt;br&gt;625 Court Street, Room 105&lt;br&gt;Woodland, CA 95695&lt;br&gt;916-375-6479 or 530-666-8130&lt;br&gt;www.yolorecorder.org/recording/fictitious</td>
</tr>
<tr>
<td><strong>Contractors State Licensing Board</strong>&lt;br&gt;Anyone performing construction work in California that totals $500 or more in labor and materials must be licensed by CSLB</td>
<td>9821 Business Park Drive&lt;br&gt;Sacramento, CA 95827&lt;br&gt;(800) 321-CSLB&lt;br&gt;www.cslb.ca.gov</td>
</tr>
<tr>
<td><strong>Department of Consumer Affairs</strong></td>
<td>Consumer Information Center: (800) 952-5210&lt;br&gt;E-mail: <a href="mailto:dca@dca.ca.gov">dca@dca.ca.gov</a>&lt;br&gt;Department of Consumer Affairs&lt;br&gt;Consumer Information Division&lt;br&gt;1625 North Market Blvd., Suite N 112&lt;br&gt;Sacramento, CA 95834</td>
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