BUSINESS LICENSE APPLICATION

Commercial/Industrial

CITY OF WEST SACRAMENTO
COMMUNITY DEVELOPMENT DEPARTMENT
1110 West Capitol Avenue, 2nd Floor
WEST SACRAMENTO, CA 95691
916-617-4645
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>$1</td>
<td>$1</td>
<td>$1</td>
</tr>
<tr>
<td><strong>TOTAL DUE</strong></td>
<td><strong>$80</strong></td>
<td><strong>$80</strong></td>
<td><strong>$54</strong></td>
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</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.ccda.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

Commercial/Industrial

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 6/24/15
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?  

☐ Yes  ☐ No

   (If yes, please contact the Building Dept. for permit requirements)

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
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

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: Yes  No
- Petroleum Oils: Yes  No
- Fuels: Yes  No
- Cleaners: Yes  No
- Hazardous Materials: Yes  No
- Solvents: Yes  No

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

- Warehouse: Yes  No
- Outside Storage: Yes  No
- Floor Drains: Yes  No
- Vehicle Wash Rack: Yes  No
- Vehicle Maintenance: Yes  No
- Fuel Islands: Yes  No
- Steam Cleaner: Yes  No
- Pressure Washer: Yes  No
- Cooling Tower: Yes  No
- Boiler: Yes  No
- Cafeteria Services: Yes  No

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
ENVIRONMENTAL HEALTH LAND USE REVIEW SURVEY

A building or business license 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 and submit it as part of your complete application.

Site address:  
City:  
Zip code:  

Existing business?  □ Yes  □ No  
If yes, name of business:  

Property and/or owner of business name:  

Phone number:  
Email:  

Mailing address:  
City:  
Zip code:  

Project Description:  
__________________________________________________________________________  

Please answer the questions below to the best of your knowledge:

For Consumer Protection Unit

1. Will your building or facility store, prepare, package, serve, vend, or otherwise provide food for human consumption at the retail level?  □ Yes  □ No
2. Will your building or facility have a public pool/spa? (A public pool/spa includes but is not limited to pools/spas located at hotels, motels, apartments, schools, health clubs etc.)  □ Yes  □ No
3. Will your building or facility be used for tattooing, body piercing or permanent cosmetics?  □ Yes  □ No

For Land Use Unit

1. Will your building or facility use a well for your drinking water source?  □ Yes  □ No
2. Will your building or facility use an onsite wastewater treatment system (i.e. septic system)?  □ Yes  □ No
3. Will your building or facility generate waste tires onsite?  □ Yes  □ No
4. Will your building or facility haul 10 or more waste tires at one time?  □ Yes  □ No

For Hazardous Materials Unit

1. Will your building or facility handle or store any hazardous materials (a hazardous material is a chemical that is flammable, corrosive, reactive or toxic)?  □ Yes  □ No
2. Will your building or facility generate hazardous materials waste (i.e. used oil)?  □ Yes  □ No

If you answered “yes” to questions 1 or 2, please complete questions 1-10 below. Otherwise, you can skip the following questions:

1. Will your commercial facility handle any hazardous materials in quantities greater than 500 pounds, 55 gallons or 200 cubic feet of compressed gas?  □ Yes  □ No

**Please turn over the page to complete and sign form**
2. Will your commercial facility repair or maintain motor vehicles or motorized equipment?  □ Yes  □ No  
If yes, will your facility handle any of the following?  

<table>
<thead>
<tr>
<th>Material</th>
<th>□ Yes</th>
<th>□ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor oil</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gasoline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Antifreeze</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hydraulic Oil</td>
<td></td>
<td></td>
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<tr>
<td>Diesel</td>
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</tbody>
</table>

3. Will your commercial facility have an above ground storage tank (AST?)  □ Yes □ No

4. Will your commercial facility sell motor vehicle fuel?  □ Yes □ No  
If yes, will your commercial facility have an underground storage tank (UST?)  □ Yes □ No

5. Will your commercial facility engage in welding operations?  □ Yes □ No  
If yes, will your commercial facility handle more than one cylinder of acetylene, oxygen, shielding or other welding gases?  □ Yes □ No

6. Will your commercial facility operate forklifts?  □ Yes □ No  
If yes, will your facility store more than one extra cylinder of propane?  □ Yes □ No

7. Will your commercial facility store batteries with 55 gallons or more of acid?  □ Yes □ No

8. Will your commercial facility engage in photography?  □ Yes □ No  
If yes, will your commercial facility generate photographic waste fluid?  □ Yes □ No

9. Will your commercial facility engage in x-ray processing?  □ Yes □ No  
If yes, will your commercial facility generate x-ray processing waste fluid?  □ Yes □ No

10. Will your facility handle yard trimmings, untreated wood wastes, natural fiber waste, or construction and demolition wood waste?  □ Yes □ No  
If yes, are these materials managed in a way which would allow them to reach 122 degrees Fahrenheit?  □ Yes □ No

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If you answered “yes” to any of the above questions under hazardous materials unit, you 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 $2,000.00 per day. As of January 1, 2013 business plans must be filed by going to the California Environmental Reporting System (CERS) website (http://cers.calepa.ca.gov), creating an account, entering required hazardous materials information, and submitting the information for approval by YCEH. For assistance with CERS submittal, please call our office at (530) 666-8646 and ask to speak with a hazmat specialist.

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_I hereby certify that the information in this document is true and correct to the best of my knowledge._

Signature:_________________________________________________  Date:___________________
## ADDITIONAL LICENSING INFORMATION

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