

<ul> <li>Finance - Licensing •</li> </ul>	
1 Vernon Street, Roseville, Californ	nia 95678
PH (916) 774-5310 • FAX (916) 77	4-5514

OFFICIAL (	JSE ONLY
Business License No.	
Expiration Date	
NAIC Code	
License Fee \$	
Check #	□ Credit Card □ Cash

## RUSINESS LICENSE APPLICATION

	SINE GO EIGENGE AITER	AIION	Check #	□Credit Card □ Cash	
PLEASE TYPE	OR PRINT WITH PEN		- N		
Business Name			Bus. Start Date		
Corporate Name		_	☐ New Application ☐ Change	e 🖵 Home Occupation	
Business Locatio	n	I	Email Address		
Daomese Locatio	(Cannot be P.O. Box per State of California Business & Professions Code-Sect	ion 17538.5)	State Sales Tax No		
			Federal ID No		
Mailing Address	Mailing Address		State ID No		
			State License No		
			State License Type		
Phone No.	Alt. No	<del></del>	Expire Date		
Description of Bu	siness				
Ownership 🗆 Co	orporation 🔍 Corp-Ltd Liability 🗘 Partnersl	hip   Sole Proprietor	☐ Trust ☐ Non-Profit		
PERSONAL INF	<b>ORMATION</b> - Enter below names of Owners, Parti	ners, or Corporate Officers	(attach additional sheet, if ne	cessary)	
1st Owner Name		Title	Social Security No.		
Home Address			Driver's License No.		
(Cannot be P.O. Box)			Home Phone No.		
=		-	Cell Phone No.		
2nd Owner Name		Title	Social Security No.		
Home Address		Driver's License No.			
(Cannot be P O Box)	>		Home Phone No.		
- 11 Gla	La Firefitta a Parista a Na a Contact a Contac		Cell Phone No.	L. J. ENIO	
Have you filed a Fictitious Business Name Statement?    Yes    No    If yes, please attach copy of approved filed FNS.					
	OTIFICATION - In case of emergency and I canno	<u>-</u>			
Name	Title				
Address			Phone No Cell Phone No		
PLEASE FILL IN THE APPROPRIATE BOXES BELOW AND SIGN  Classification and Fee - Please review the fee schedules on the reverse side of this application and enter the applicable fees below.					
CERTIF	ICATION AND ACKNOWLEDGEMENT	No. of Residential #	Owners/Em		
	nalty of perjury that the statements made in this . I further agree that business shall be conducted	Rental Units Estimated Current Year Ar		proyees	
in accordance with	the City of Roseville Municipal Code Chapter 6.04 I understand that Sales or Use Tax may apply to	Receipts for Sales and/or	Ι Ψ		
my business activit	ies. Upon issuance of a Business License, it shall y to renew the license annually by January 31st.	all Base Fee (required for each license) \$ RETURN APPLICATION			
SIGN HERE	y to renew the license annually by January 31st.	Home Occupation App		TO ABOVE ADDRESS AND MAKE CHECK PAYABLE TO	
<b>→</b>		State CASp Fee TOTAL AMOUNT DU	\$ 1.00 \$	CITY OF ROSEVILLE	
	Signature of Owner or Representative				
Title	Date	NOTICE: Under federal and state law, compliance with disability access laws 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			
Thank you fo	r doing business in the City of Roseville	obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at <a href="https://www.dgs.ca.gov/dsa/Home.aspx">www.dgs.ca.gov/dsa/Home.aspx</a> - The Department of Rehabilitation at <a href="https://www.rehab.cahwnet.gov">www.rehab.cahwnet.gov</a> - The California Commission on Disability Access at <a href="https://www.ccda.ca.gov">www.ccda.ca.gov</a> .			