

CITY OF RIO VISTA
One Main Street, Rio Vista, CA 94571
BUSINESS LICENSE APPLICATION

<input type="checkbox"/> NEW	<input type="checkbox"/> CHANGE	<input type="checkbox"/> RENEWAL	City License# _____
Business Name (dba) _____		Business Phone () _____	
Business Address _____		City _____	Zip _____
Business Mailing Address _____		City _____	Zip _____
Email address _____			
Please provide an email address, if available. Email is our preferred method of communication in case of application questions.			
Business Activity (Please describe in detail exactly what your business is being licensed to do. If you need extra space please attach separate sheet of paper) _____			
How many quarters will you be paying for? _____		How many employees will you be paying for? _____	
Type of Organization <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation			
Sole Proprietor or Partnership			
Owner's Name _____		Home Address _____	
City _____		State _____	Zip _____ Home Phone () _____
Corporations			
Name of Corporation _____		Federal ID# _____	State ID # _____
Start Date of Business _____		Seller's Permit # _____	Will Firearms be sold? <input type="checkbox"/> Yes <input type="checkbox"/> No
Contractor's State License No. _____		Exp. Date _____	License Type _____
Does your business occupy more than one location in Rio Vista? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes please provide additional locations: _____			
Size of Business Floor Space in sq ft: _____		Date Business Established: _____	
Is this a home based business within the City of Rio Vista's City limits? <input type="checkbox"/> Yes <input type="checkbox"/> No			
ADDITIONAL INFORMATION			
Emergency Contact: (person with building access)			
Name _____		Title _____ () _____	
Alarm Company (if applicable) _____			
Contract/License # _____		CSZ _____	Phone () _____

The issuing of your Business License is for revenue purposes only. It does not relieve you from the responsibility of complying with the requirements of any other departments of the City of Rio Vista and or any other ordinance, law or regulations of the City of Rio Vista, State of California, or any other Governmental agency. All Business Licenses must be renewed by the expiration date whether or not you receive a renewal notice. Change of ownership, address or business activity requires a new+ application. If you are no longer conducting business in Rio Vista you must notify us in writing the date you ceased work in the City. A regional or corporate license is not a substitute for a City business license. Final occupancy is subject to inspection and approval by Building and Fire Departments. Inspection fees and additional permits may be required. Zoning permit approval is required by the Planning Department before issuance of a Business License and a permit for a sign may be required. The number of persons, including owners and managers determines your business license fee. Your license is due and payable on the first day of business operations and for each quarter/year thereafter. *** If payments are not received thirty (30) days from that date, you will be charged a penalty for each month or fraction thereof that the payment is past due.**

CITY OF RIO VISTA
One Main Street, Rio Vista, CA 94571
BUSINESS LICENSE APPLICATION

BUSINESS LICENSE FEES: (please read calculations across from left to right to determine fee due)

If you have a fixed place of Business in Rio Vista and the number of employees including yourself is:

1 to 5 \$10.00 per quarter x 4 qtrs = \$ _____ or
 6 to 10 \$20.00 per quarter x 4 qtrs = \$ _____ or
 11 or more \$40.00 per quarter x 4 qtrs = \$ _____
 Plus annual ADA tax \$ 1.00
***Late fee, if applicable (10% per month)** = \$ _____
 Then your total tax is \$ _____

If you have no fixed place of Business in Rio Vista and the number of employees including yourself is:

1st Employee \$25.00 per quarter x 4 qtrs = \$ _____ plus
 2nd thru 5th Employee \$10 each per qtr (# of emp x \$10 x # of qtrs. = \$ _____ plus
 6 or more employees \$ 7 each per qtr (# of emp x \$7 x # of qtrs. = \$ _____ plus
 Plus annual ADA tax = \$ 1.00
***Late fee, if applicable (10% per month)** = \$ _____
 Then your total tax is \$ _____

If you have no fixed place of business in Rio Vista and have delivery trucks or delivery vehicles:

Number of trucks _____ X \$10 per quarter = **Total Truck Tax due** \$ _____
 Total business license due from above \$ _____
 Total business license/truck fees due = \$ _____

Any person violation any of the provision of Chapter 5 of the City of Rio Vista Municipal Code, or knowingly or intentionally misrepresenting to officer or employee of this City any material fact in procuring a license shall be deemed guilty of a misdemeanor, and upon conviction thereof, shall be punishable by a fine of not more than five hundred dollars or by imprisonment for a period of not more than six months, or both such fine and imprisonment.

****ALTERED APPLICATIONS WILL NOT BE ACCEPTED****

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRURE AND CORRECT

Authorized Signature _____

Date _____

OFFICIAL USE ONLY

OFFICIAL USE ONLY		Signature Required	Date
Planning	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Building	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Police	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Fire	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Public Works	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Date:	License Fee:	Paid:	Receipt:
Date:	State ADA tax:	Paid:	Receipt:
Date:	Fire Inspection:	Paid:	Receipt:
Date:	Home Occupation:	Paid:	Receipt:
Date:	Building Inspections:	Paid:	Receipt:

Processed by: _____ Permit Expires: _____

I have received a copy of the City of Rio Vista's Home Occupation Zoning Ordinance and a copy of additional conditions of approval: _____

FOR OFFICE USE ONLY

Late Payment Penalty Fee: _____

DRC Meeting Date: _____

Live Scan approval received: _____

Live Scan disapproved: _____