

CITY OF MT. SHASTA
305 N MT SHASTA BLVD ~ MT SHASTA, CA 96067 ~ (530)926-7510
~BUSINESS LICENSE APPLICATION~

- Regular Business Licence Daily License (\$15/day or \$135/qtr) Peddler/Solicitor
- Seasonal/Quarterly
Specify months of operation _____ Door to Door Fixed Mobile Mobile
- Non-Profit Organization Other (specify) _____

NAME OF BUSINESS : _____

NAME OF BUSINESS OWNERS: _____

BUSINESS ADDRESS: _____

MAILING ADDRESS (IF DIFFERENT): _____

BUSINESS TELEPHONE: _____ PERSONAL/CELL PHONE: _____

TYPE OF BUSINESS: _____

WHOLESALE () RETAIL () PERSONAL SERVICES ()
FOOD SERVICE () # OF SEATS _____ MOTEL/HOTEL () # OF ROOMS _____
RENTALS () # OF RENTAL UNITS _____ OTHER () specify _____

SQ. FT. OF BUSINESS FLOOR (parking district only-see map): _____

NUMBER OF ON-SITE PAVED PARKING SPACES (parking district only-see map): _____

NO. OF LOCAL FULL-TIME EMPLOYEES: _____ PART-TIME: _____

FEDERAL TAX ID OR SOCIAL SECURITY NO: _____

OWNER'S DRIVERS LICENSE NO.: _____ ISSUING STATE _____ EXPIRES: _____

State Board Sellers Permit No.: _____ State Contractors License No.: _____

Are any signs or banners anticipated _____ yes* _____ no *If yes, you are required to obtain a sign permit. If you fail to do so, you may be subject to fines & penalties.

Issuance of a business license is intended solely as evidence that the required tax has been paid, and does not indicate approval to operate said business if Planning, Health, or Building Department approvals are required for the proposed operations and/or location. No refunds will be made if denial of such approvals prevents the business from operation, so those departments should be contacted before remitting license fees.

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF BUSINESS OWNER: _____

OFFICE USE ONLY

HOME OCC. REQ. _____ APPROVED: _____

ACCT NO: _____ Date Received/Opened: _____ Amt Paid \$ _____ Receipt # _____

SNOW _____ PARK DIST _____ CLASS DETAILS _____

(PLEASE SEE REVERSE FOR INSTRUCTIONS AND APPROVAL REQUIREMENTS)

INSTRUCTIONS

If your business is located in the downtown Mt. Shasta area you will be required to pay parking fees and snow removal fees. Please see attached maps for designated areas.

Planning Department clearance is required if you are installing or changing any signage, or you are modifying the facility or changing the type of the facility. If you are going to be conducting your business out of your home, you are required to have a Home Occupational Use Permit along with a City Business License. The planning Department will assist you in determining requirements, prior to that department's approval of your application.

Are any signs or changes anticipated? Yes ____ No ____

Will you be operating your business out of your home? Yes ____ No ____

*If yes, a home occupation permit will be required. Please ask for a Home Occupation Permit Application at City Hall prior to submitting your license.

Are any changes anticipated to the structure? Yes ____ No ____

Building Department clearance is required if you are making any modifications to the facility in which you are operating, or it is a change in the type of use previously at that facility. If yes, please contact City Hall for Building Permit requirements and for the application.

If your business name is going to be anything other than your name, you will need to obtain a fictitious Name statement through the Siskiyou County Clerks Office located at 311 4th St. Yreka, CA.
(530) 842-8084.

Other information:

All businesses need a Federal Tax I.D. number. This is required for reporting Federal Income Tax. You will need to contact the Internal Revenue Service at (800) TAX-1040, or by website at www.irs.gov.

All businesses need a report State Income Tax. You will need to contact the Franchise Tax Board at (800) 852-5711, or by website at www.ftb.gov.

If you will be in the retail industry, you will need to pay Sales Tax. To obtain a Seller's Permit, you need to contact the State Board of Equalization at (800) 400-7115, or by website at www.boe.ca.gov.

Attached is a list of business types that require Health Department approval. Please check the list, if your business type is listed, please contact the Health Department at 806 S. Main St. Yreka, CA
(530) 841-4040.