



TOWN OF DANVILLE

510 La Gonda Way • Danville, CA 94526
(925) 314-3326
www.ci.danville.ca.us

BUSINESS LICENSE APPLICATION

- Please Check One*
- New Application
 - Change of Owner
 - Change of Address
 - Change of Business Name
 - Home Occupation

Business Name _____ **Bus. Start Date** _____

Business Owner Name _____ **State Resale No.** _____

Business Address _____ **Federal ID No.** _____
(Cannot be P.O. Box per State of California Business & Professions Code-Section 17538.5)

Mailing Address _____ **State Employer ID No.** _____

Business Phone _____ **Fax No.** _____ **State Contractors Lic. No.** _____

Description of Business _____ **State Lic. Type** _____

Ownership Corporation Corp-Ltd Liability Partnership Sole Proprietor Trust **Expire Date** _____

Business Location Owned Rented **Email Address** _____

If Rental: List Building **APN Number** _____

Owner Name _____

Building Owner Address _____

Enter below names of Owners, Partners, or Corporate Officers (attach additional sheet, if necessary)

1st Owner Name _____ **Title** _____

Home Address _____
(Cannot be P.O. Box)

Home Phone No. _____ **Cell / Pager No.** _____ **Driver Lic. No.** _____

2nd Owner Name _____ **Title** _____ **Soc. Sec. No.** _____

Home Address _____

Home Phone No. _____ **Cell / Pager No.** _____ **Driver Lic. No.** _____

In case of emergency, please contact (attach additional sheet)
PLEASE LIST ONLY THE PEOPLE WHO ARE ABLE TO RESPOND

Contact Name _____

Phone # _____ **Cell #** _____

Alarm Company, if applicable (attach additional sheet)

Company Name _____

License # _____ **Phone #** _____

Businesses in Danville commercial districts will be listed in the directory of the Danville In Style all-inclusive website designed to promote local businesses (www.danvilleinstyle.com)

DBA _____

Personal Email (internal use only) _____

Business Email (for customers) _____

Website URL _____



Date _____ **Approved** **Denied**

Received By _____

Amount _____ **CK#** _____

Permit # _____

Zoning _____

Land Use _____

Audit _____

Police _____

Business License # _____

Home Occupation

Health Dept.

EXEMPTIONS AND OUT OF BUSINESS

If you are exempt from fees, sign the appropriate statement on the fee schedule.

If you are no longer doing business in Danville, sign the appropriate statement on the fee schedule.

HAZARDOUS MATERIALS

Does your business have hazardous materials on site? Yes No

TOBACCO RETAILER'S LICENSE

Chapter 7-6 of the Danville Municipal Code requires all persons or entities selling tobacco products on a retail basis within the Town of Danville to maintain a tobacco retailers license. If you are a tobacco retailer, please indicate below.

I'm planning to sell tobacco products on a retail basis within the Town of Danville and I'm enclosing an application for tobacco retailer's license. See Fee Schedule for more details.

BUSINESS FEE CALCULATION

The fee schedule is attached. Please select the proper fee for your business and show your calculation here:

Class: A B C C1
Other: _____ (Circle One)

Flat Fee \$ _____

Danville Employee Fee \$ _____

Total Amount Due \$ _____

A check for the appropriate fee payable to "Town of Danville" must accompany this application. No license will be issued without payment.

I declare under penalty of perjury that all statements contained herein are, to the best of my knowledge and belief, true and that all necessary land use permits, building permits and any other permits required by law have been or will be secured prior to the commencement of the business activity which is the subject of this application.

Executed at _____ California on _____ 20_____

Signature of Owner or Representative: _____ Print Name: _____ Date: _____

AVOID PENALTIES - FILE PROMPTLY - ALL BUSINESSES ARE SUBJECT TO AUDIT