

CITY OF IMPERIAL BEACH
825 Imperial Beach Blvd.
Imperial Beach, CA 91932
(619) 628-1423

FEES ARE NON-REFUNDABLE

BUSINESS TAX CERTIFICATE APPLICATION
For Businesses located within the Imperial Beach City Limits

NOTE: ALL APPLICABLE QUESTIONS MUST BE ANSWERED OR APPLICATION WILL BE REJECTED

IMPORTANT - PLEASE READ

It is highly recommended you **verify compliance with City zoning, building, and sign regulations before applying for a Business Tax Certificate**, as the issuance of a Business Tax Certificate does not guarantee your business meets applicable regulations. It is the business owner's responsibility to verify with the Planning and Building Departments that all applicable zoning, building, and signage codes are met before conducting business. If your business is found to be in non-compliance with any code or regulation **you may receive a citation and/or your Business Tax Certificate may be rescinded without a refund.**

I have read the above statement _____ (Applicant's Initials)

NEW BUSINESS CHANGE OF ADDRESS CHANGE OF OWNERSHIP CHANGE OF BUSINESS NAME RENEWAL

1. Business Name: _____ Phone No. _____

2. Business Address: _____

3. Mailing Address: _____

4. Type of business (use reverse side if more space needed): _____

Contractor Professional Broker Pawnbroker Secondhand Dealer ABC Retail Food Service

License No. _____ Exp Date: _____ Classification: _____

Federal ID No. _____ State ID No. _____ Resale Tax No. _____

5. Structure of Business: Corporation Single Ownership Co-Partnership Other _____

Will you have: Entertainment Dancing Dancers DJ Amplified sound Band Other _____

6. Number of Employees: _____

7. Number of: Vending Machines _____ Music _____ Game _____ Pool Tables _____ Other _____

If machines are leased, name/address of vendor: _____

8. If machine vendor: Please **attach list** giving type and location of all machines in the City of Imperial Beach.

9. Owner/Officer/Manager Information -Name: _____ Phone No: _____

Address: _____

10. Emergency Contact Name: _____ Phone No: _____

11. Is this a change of use? Yes No 12. Proposed date of opening: _____

13. Will your business have a sign? Yes No - If yes, you will need a Comprehensive Sign Permit before it is installed or modified. See Planning.

14. Will you be doing any building modifications? Yes No Unknown - If yes, you may need a Building Permit. See Building Department.

I HEREBY DECLARE UNDER THE PENALTY OF PERJURY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE STATEMENTS MADE HEREIN ARE CORRECT AND TRUE.

SIGNATURE _____ DATE: _____

FINANCE DEPT. BASIC FEE: \$ _____ No. of Emp. _____ BID Zone _____ TOTAL FEE \$ _____

DATE ISSUED: ____/____/____ LICENSE # _____ BUS CONTROL # _____ RECEIPT # _____

ZONING COMPLIANCE _____ OTHER _____

