



City of Santa Rosa
Business Tax Certificate Application

Business Tax Division
8839 N Cedar Ave #212, Fresno, California 93720
PH (707) 606-0046 • FAX (909) 348-0465

Apply Online Today At: https://santarosa.hdlgov.com

OFFICIAL USE ONLY
Bus. Tax Certificate No.
Expiration Date
NAIC Code
Tax Due \$
Check # Credit Card Cash

PLEASE TYPE OR PRINT WITH PEN - *Items that appear with an asterisk are public information

Business Name*
Corporate Name* (if applicable)
Business Location* (Cannot be P.O. Box per State of California Business & Professions Code-Section 17538.5)
Mailing Address*
Bus Phone No.* Alt. No.
Description of Business
Ownership* Corporation Corp-Ltd Liability Partnership Sole Proprietor Trust Non-Profit
Bus. Start Date*
New Application Change Home Occupation
Email Address*
Web Address*
State Sales Tax No.
Federal ID No.
State ID No.
State License No.
State License Type
Expire Date

PERSONAL INFORMATION - 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)
Contact Person
Social Security No.
Driver's License No.
Other ID No.
Phone No.
Cell Phone No.

EMERGENCY NOTIFICATION - In case of emergency and I cannot be reached, please call:

Name Title
Address Phone No.
Cell Phone No.

Is this a home based business? Yes No Does this business involve sale of concealable firearms? Yes No
Is this a business involved in the Cannabis Industry? Yes No
If yes, choose all that apply. Cultivator Dispensary Distributor Manufacturer Other
Per AB 2184, you may protect your residential address by providing a different Service of Process address in accordance with Sections 16000.1(a) (2) and 16100.1(a)(2) of the Business and Professions Code. To do so, please fill out the section on the back of this form .

Zoning Requirement: If you are a new business located inside the Santa Rosa city limits, you will need to go to the Planning and Economic Development Office, City Hall, Room 3 for zoning clearance. The Planning and Economic Development Office is open Monday through Friday. Please go to www.srcity.org/ped or call 707-543-3200 for counter hours.

PLEASE FILL IN THE APPROPRIATE BOXES BELOW AND SIGN

Please provide the following information about your business.

CERTIFICATION AND ACKNOWLEDGEMENT

I declare under penalty of perjury that the statements made in this application are true and correct, and that all required licenses and permits are in full force and effect. I understand that a Business Tax Certificate does not permit business operation unless my business is properly zoned and/or in compliance with all applicable laws/rules. I understand that Sales or Use Tax may apply to my business activities.

No. of Residential Rental Units #
No. of Owners/Employees #
No. of Delivery / Pickup Units #
Estimated First Year Annual Gross Receipts (GR) \$

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 obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at www.dgs.ca.gov/dsa - The Department of Rehabilitation at www.dor.ca.gov - The California Commission on Disability Access at www.cdda.ca.gov.

SIGN HERE

Signature of Owner or Representative
Title Date

Thank you for doing business in the City of Santa Rosa

RETURN APPLICATION BY MAIL TO:

City of Santa Rosa - Business Tax Support Center
8839 N. Cedar Ave #212
Fresno, CA 93720-1832

SCAN & RETURN APPLICATION BY EMAIL TO:

santarosa@hdlgov.com

SERVICE OF PROCESS ADDRESS, PURSUANT TO AB 2184 - AVAILABLE FOR PUBLIC INSPECTION

If you wish to protect your residential address with a different service of process address, please provide it here.

NOTE - if your service of process address is a post office box or private mailbox, it must comply with paragraph (2) of subdivision (b) of Section 17538.5 of the California Business and Professions Code.

Service of Process Address

Residential Address to protect

Business Location

Mailing Address

Owner/Partner/Officer Address