



CITY OF LAWDALE

14717 Burin Avenue | Lawndale, CA 90260 | (310) 970-2100

BUSINESS LICENSE TAX APPLICATION-DEPOSIT ONLY SUBJECT TO APPROVAL

THIS APPLICATION MUST BE FILLED OUT COMPLETELY BEFORE LICENSE CAN BE ISSUED

Start Date _____	Ownership:		
Business Name _____	<input type="checkbox"/> Corporation	<input type="checkbox"/> Corp-Ltd Liability	
Business Address _____	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietor	
City _____	<input type="checkbox"/> Trust	<input type="checkbox"/> Non Profit	
State _____	<input type="checkbox"/> Limited Partnership		
ZIP _____			
<small>(Cannot be P.O. Box for non-exempt businesses per State of California, Business & Professions Code-Section 17538.5)</small>			
Mailing Address _____	City _____	State _____	ZIP _____
Bus. Phone () _____	Bus. Fax () _____		
Business Type _____	Resale No. _____		
Description of Business _____	FEIN No. _____		
	SEIN No. _____		
	State Lic. No. _____		
	Lic. Type _____	Exp. Date _____	

Enter below names of Owners, Partners, or Corporate Officers – Use additional sheets as necessary

Owner Name _____	Title _____	Soc. Sec. No. _____
Home Address _____	Phone () _____	Date of Birth: _____
_____		Drivers Lic. No. _____
<small>(Cannot be P.O. Box)</small>		
Owner Name _____	Title _____	Soc. Sec. No. _____
Home Address _____	Phone () _____	Date of Birth: _____
_____		Drivers Lic. No. _____
<small>(Cannot be P.O. Box)</small>		

In case of emergency, please contact:

Name _____	Title _____	Phone () _____
Address _____		

Alarm Company (If applicable)

Name _____	Phone () _____
Address _____	License No. _____

Vehicle Information (If applicable) – Must be filled out completely before stickers can be issued. (use additional sheets if necessary).

License Plate #: _____	VIN#: _____
State Veh. Registered: _____	Year: _____ Make: _____ Model: _____ Color: _____

WORKER'S COMPENSATION INSURANCE

POLICY #: _____

I certify that in the performance of work for which this license is issued I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California.

NOTE: If after signing the certificate, you hire any employee, you become subject to the workers' compensation provisions of the California Labor Code, and you must immediately comply with the provisions of the California Labor Code, and you must immediately comply with the provisions of Section 3700 or your license immediately becomes revoked.

Signed _____

I DECLARE, UNDER PENALTY OF PERJURY, THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT, AND THAT ALL REQUIRED LICENSES ARE IN FULL FORCE AND EFFECT.

Date: _____ Signature of Owner or Representative: _____

RETURN ENTIRE APPLICATION FORM TO ABOVE ADDRESS AND MAKE CHECK PAYABLE TO CITY OF LAWDALE

OFFICE USE ONLY – PLEASE DO NOT WRITE BELOW THIS SECTION

BUSINESS LICENSE NO. _____	Thank you for	# of Emp. _____ = \$ _____
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		# of Veh. _____ = \$ _____
	doing business	# of Rental Units _____ = \$ _____
		# of Vend. Mach. _____ = \$ _____
Building _____ Date _____	in the	If vending machines are rented give owner of machine:
Zoning _____ Date _____		Address: _____
Fire _____ Date _____		
Health _____ Date _____		City Tax \$ _____
Sheriff _____ Date _____		Application Fee \$ _____
Receipt #: _____ Date: _____	City of	Alarm Permit Fee \$ _____
CK/MO #: _____ Amt: \$ _____		Special Permit Fee \$ _____
Cash: \$ _____ Taken by: _____		TOTAL DUE \$ _____
	Lawndale!	

CITY OF LAWNSDALE

BUSINESS LICENSE FEE SUMMARY

THE BASIC TAX FOR ANY LICENSE NOT SPECIFICALLY LISTED BELOW IS AS FOLLOWS: \$64.00 + \$8.75 per employee.

All businesses pay a one-time application fee of \$75.00.

All businesses (including residential) located inside the City with an alarm system, must pay a \$50.00 alarm permit.

Residential rental pay \$24 per unit.

- If 5 or less units, the business is exempt from the application fee.
- If 5 or less units, the business receives a credit of one unit.
- If 5 or less units and owner occupied, the business receives an additional credit of one unit.
- If 10 or more units, must pay \$64 for each coin operated machine located on the premises.

Mobile home parks or boardinghouses pay \$10 per unit.

Wheeled vehicle businesses with 1 vehicle pay \$64 + \$8.75 per employee plus:

- 100.00 for 2 to 3 vehicles
- 150.00 for 4 to 6 vehicles
- 200.00 for 7 to 10 vehicles
- 250.00 for 10 or more vehicles

Contractors pay \$64 + \$8.75 per employee plus \$25 per vehicle over 4 vehicles.

Billboard businesses pay \$64 + \$8.75 per employee plus:

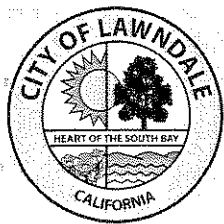
- \$500.00 for the first \$10,000 of gross receipts plus
- 50.00 per \$1,000 for \$10,000 to \$25,000 of gross receipts plus
- 20.00 per \$1,000 for gross receipts over \$25,000

Coin-operated machines (exclusive business) pay \$64.00 + \$8.75 per employee plus:

- \$114.00 for the first \$10,000 of gross receipts plus
- 50.00 per \$1,000 to \$25,000 of gross receipts plus
- 20.00 per \$1,000 for gross receipts over \$25,000

IN ADDITION, THE FOLLOWING BUSINESSES MUST PAY SPECIAL PERMIT FEES AS FOLLOWS:

<table border="0" style="width: 100%;"> <tr><td>Acupressure</td><td style="text-align: right;">\$150.00</td></tr> <tr><td>Ambulance driver/operator</td><td style="text-align: right;">50.00</td></tr> <tr><td>Auctioneers</td><td style="text-align: right;">100.00</td></tr> <tr><td>Auto wrecker/dismantler</td><td style="text-align: right;">325.00</td></tr> <tr><td>Bar</td><td style="text-align: right;">275.00</td></tr> <tr><td>Billboards</td><td style="text-align: right;">500.00</td></tr> <tr><td>Broker, stock</td><td style="text-align: right;">150.00</td></tr> <tr><td>Bus benches</td><td style="text-align: right;">50.00 + \$13.00 per bench</td></tr> <tr><td>CATV</td><td style="text-align: right;">50.00 + \$1 per subscriber</td></tr> <tr><td>Cabaret</td><td style="text-align: right;">100.00</td></tr> <tr><td>Carnival, daily</td><td style="text-align: right;">250.00</td></tr> <tr><td>Circus, daily</td><td style="text-align: right;">100.00</td></tr> <tr><td>Check cashing</td><td 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<tr><td>Locksmith</td><td style="text-align: right;">50.00</td></tr> <tr><td>Massage parlor</td><td style="text-align: right;">500.00</td></tr> <tr><td>Petroleum</td><td style="text-align: right;">100.00 per oil well</td></tr> <tr><td>Pest control</td><td style="text-align: right;">50.00</td></tr> <tr><td>Private patrol</td><td style="text-align: right;">50.00</td></tr> </table>	Acupressure	\$150.00	Ambulance driver/operator	50.00	Auctioneers	100.00	Auto wrecker/dismantler	325.00	Bar	275.00	Billboards	500.00	Broker, stock	150.00	Bus benches	50.00 + \$13.00 per bench	CATV	50.00 + \$1 per subscriber	Cabaret	100.00	Carnival, daily	250.00	Circus, daily	100.00	Check cashing	250.00	Collection agency	250.00	Computer dating svc	500.00	Entertainment, café	100.00	Fortuneteller	250.00	Handbills, annual	225.00	Handbills, quarterly	125.00	Handbills, daily	25.00	Home occupation	10.00	House number painter	25.00	Junk wrecker	350.00	Junk collector	50.00 + \$125.00 per vehicle	Junk 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<tr><td>Solid Waste</td><td style="text-align: right;">700.00 per truck</td></tr> <tr><td>Taxi</td><td style="text-align: right;">100.00 + \$10 ea vehicle</td></tr> <tr><td>Theater</td><td style="text-align: right;">500.00</td></tr> </table>	Arcade	\$ 10.00 per machine	Amusement machines	50.00 per machine	Amusement ride annual	50.00 per machine	Amusement ride daily	25.00 per machine	Bowling alley	50.00 + \$10 over 5 alleys	Billiard/pool hall	50.00 + \$10 over 1 table	Games of skill	25.00 per machine	Juke box	50.00 per machine	Film permits, public		Still, daily	250.00	Motion, daily	500.00	Film permits, private property		Still, daily	50.00	Motion, daily	100.00	Bingo	25.00	Dance Hall	25.00	Passenger/bus	50.00	Parking lot	25.00 + \$9 per stall	Pawn Shop	200.00	Side show	100.00	Souvenir sales, daily	10.00	Solicitor	275.00 + \$10 each agent	Solid Waste	700.00 per truck	Taxi	100.00 + \$10 ea vehicle	Theater	500.00
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CITY OF LAWNDALE
COMMUNITY DEVELOPMENT DEPARTMENT
14717 Burin Avenue
Lawndale, CA 90260
Telephone: (310) 973-3230, Fax: (310) 970-2183

Zoning Approval for New/Modified Business License (including HOC)

To all applicants: Every business must meet planning and zoning requirements to ensure its business category and site are compatible. Before signing a lease or investing in a location, fill out this application to receive planning and zoning review for your proposed business.

Date: _____
Business Address (Include Suite or Unit Numbers): _____
Business Owner: _____
Applicant Name (if different from business owner): _____
Telephone _____

Business Description

Please provide a general description of your business. Information should include what the proposed business is and how it operates. Who does the business serve and how does it do it? (use additional sheets as necessary)

If you are proposing to share the tenant space with an existing business, please provide details of the existing use and how the proposed use will be compatible. If you are not proposing to share the space, please mark Not Applicable (N/A).

Please answer the following questions specifically. If a question does not apply to your business please note: N/A (not applicable).

Hours of Operation: _____

Number of Employees: _____

Equipment used: _____

Number and type of vehicles used:

Location where vehicles are parked (some applications will require a parking plan to be submitted, Planning will notify you): _____

Alcohol served: _____

Cigarettes or tobacco products sold: _____

Hazardous Materials connected with the business: _____

Proposed Tenant Improvements (change made to the exterior or interior of the business):

New signs proposed (before commissioning any new signs receive separate approval for signs): _____

DEPARTMENT USE ONLY:

Date Received: _____

Zoning: _____

Approved

Denied

More information required

Planner

Date

Explanation of denial: _____
