Business License Application Form

MAIL TO:
City of Wasco
Attn: Business License Dept
764 E Street
Wasco, CA 93280

OFFICE USE ONLY
CID _____
BL _____
BILL

- **Five (5) page application must be filled out completely and signed before license can be issued. An application is required for each location.**
- **Business License Effective: *January 1, 2026 - December 31, 2026.***

Business Information

Type of Ownership *(Check One):* ☐Sole Proprietor ☐Partnership ☐Corporation ☐Cooperative ☐Non-Profit

Please Check One:
☐New Application
☐Change of Address
☐Change of Owner
☐Change of Business Name

Business Name	**Date Business Opened**
Corporate Name *(if applicable)*	**Business Phone No.**
Physical Business Address	**Business License No.**
Business Mailing Address *(List address to receive service of process per AB2184, §16000.1(a)(2) and 16100.1(a)(2))*	**No. of Business Owners**
State Professional License No. / **License Type / Class** / **Expiration Date**	**No. of Partners**
State Contractor License No / **License Type / Class** / **Expiration Date**	**No. of Employees**

NOT PUBLIC INFORMATION — **Name of all owners/corporations list officers, including titles:** — **NOT PUBLIC INFORMATION**

Business Owner/CEO Name	**Phone No.**
E-mail	
Home Address	**SSN/EIN or Other ID No.**
Business Partner	**Title**
Home Address	**Phone No.**

Emergency Information will be shared with the Kern County Sheriff's Department in case they need to contact you during an emergency. Please ensure you provide accurate information.

Emergency Contact Name	**Relationship**	**Phone No.**

By signing this application, I agree to abide by all ordinances of the City of Wasco, including but not limited to the ordinance set by the City of Wasco relating to operation of business, and certify under penalty of perjury that this information is true and correct. Willfully falsifying information will result in revocation of the business license.

Print Name	**Signature**	**Date**

WORKERS' COMPENSATION DECLARATION

I have and will maintain a certificate of consent to self-insure for Worker's Compensation, as provided by Section 3700, for the duration of any business activities conducted for which this license is issued.

I certify that in performance of any business activities for which this license is issued I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the Worker's Compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with the provisions of Section 3700.

I have and will maintain Worker's Compensation insurance, as required by Section 3700, for the duration of any business activities conducted for which this license is issued. My Worker's Compensation insurance carrier and policy number are: Carrier_____Policy Number _____

WARNING: Failure to secure Worker's Compensation coverage is unlawful and shall subject an employer to criminal penalties and civil fines up to $100,000. In addition to the cost of compensation, damages as provided for in Section 3706 of the labor code, interest and attorney fees.

City of Wasco

FEE CALCULATION

Penalty for Delinquent Fee: To all delinquent license fees there shall be added a penalty of ten percent (10%) of the amount of the fee due plus an additional ten percent (10%) for each month delinquent thereafter providing that the amount of any penalty shall in no event exceed one hundred percent (100%) of the amount of the license fee due.

BASE FEE	**1**	**X $35.00**	**= $35.00**
CA STATE FEE	**1**	**X $1.00**	**= $1.00**

PLUS (+)

- No. of Employees (In Wasco) _____ x $20.00 =$_____
- No. of Coin Machines/ Pool Tables/Delivery Trucks _____ x $10.00 = $_____
- No. of Residential Units _____ x $10.00 = $_____
- No. of square feet Commercial _____ x $10.00 = $_____
- Fats, Oils and Grease Fee _____ x $50.00 = $_____

TOTAL = $ _____

***FEES WILL BE CONFIRMED BY FINANCE DEPT.**

Circle Applicable Business Type	Base Fee	Unit Fee Amount
General Fee Rates	$35.00 plus	$20.00 times the number of persons engaged in such business
Residential Property Rental	$35.00 plus	$10.00 per unit of dwelling in excess of 3 units
Non-residential Property Rental	$35.00 plus	$10.00 per 1,000 sq. ft. or fraction thereof
Real Estate Brokerage	$35.00 plus	$20.00 per each sales person and employee
Dance Hall Operator	$35.00 plus	$330.00 flat annually
Vehicle Wrecking Facility	$35.00 plus	$330.00 flat annually
Christmas Tree Lot Sales Operation	$35.00 plus	$330.00 flat annually
Commercial Advertising	$35.00 plus	$330.00 flat annually
Commercial Advertising Vehicle Activity	$35.00 plus	$35.00 per each vehicle
Fortunetelling	$35.00 plus	$552.00 flat annually
Junk Dealer	$35.00 plus	$552.00 flat annually
Auto Dismantling	$35.00 plus	$552.00 flat annually
Pawnbroker	$35.00 plus	$552.00 flat annually
Secondhand Dealer	$35.00 plus	$330.00 flat annually
Itinerant Vendor	$35.00 plus	$552.00 flat annually
Commercial Solicitors	$35.00 plus	$552.00 flat annually
Curb Painters	$35.00 plus	$20.00 per day per person
Carnival Operator	$35.00 plus	$275.00 flat daily
Amusement Machine Activity	$35.00 plus	$10.00 per each machine
Vending Machine Activity	$35.00 plus	$10.00 per each machine
Transient Outdoor Business	$35.00 plus	$110.00 flat daily
Food Vending Machine	$35.00 plus	$552.00 flat annually
Non-profit / Charitable Organizations	$35.00 plus	$20.00 flat annually
Contractors Only (w/gross receipts under $50,000.00 in the City of Wasco)	$35.00 plus	$20.00 flat annually
Contractors Only (w/gross receipts over $50,000.00 in the City of Wasco)	$35.00 plus	$20.00 times the number of persons engaged in such business

City of Wasco

BUSINESS OPERATIONS STATEMENT

This page is required to get a business license

Date _____

_____, will be the owner of _____
(First and Last Name) (Name of Business)

I intend to operate between the hours of _____ on the following days of the week _____.
(Hours of Operation) (Days of Operation)

My business is a _____ business that will provide the following products / services:
(Type of Business)

_____

_____

The following statements **must be initialed as an acknowledgment** that you have reviewed the information:

(For Businesses inside the Wasco City Limits ONLY)

_____I understand that any form of misrepresentation is grounds for the City to revoke my business license.

_____I understand that if I use any signage, I must apply for a sign permit prior to putting up any signs. Failure to comply may result in code enforcement action.

_____I understand that any building modifications (including electrical and plumbing) may require a building permit.

_____I understand it is my responsibility to set up water, sewer, and trash service accounts with the City of Wasco.

_____ I understand my business may be subject to a Fats, Oils, and Grease fee.

_____I understand my business may be subject to the National Pollutant Discharge Elimination System (NPDES)permit program (Please complete attached SB 205 Compliance form).

_____I understand my business may be subject to mandatory commercial recycling requirements through CalRecycle. For more information, please visit: www.calrecylce.ca.gov/recycle/commerical/.

_____ _____
Signature Date

City of Wasco

City of Wasco 2021 Business License Supplement

SB 205 Compliance

(For Businesses Inside the Wasco City Limits ONLY)

Pursuant to SB 205, businesses applying for an initial business license or business license renewal that are subject to the NPDES permit program under the State Water Resources Control Board and the California Regional Water Quality Control Boards are required to demonstrate enrollment with the NPDES permit program by providing specified information on the Business License application.

To determine if your business is subject to NPDES requirements please read below from the State Water Resources Control Board Website (https://www.waterboards.ca.gov/water_issues/programs/npdes/)

> *"Do you discharge pollutants from a point source to a water of the United States? If so, you need an NPDES permit.*
> *As authorized by the Clean Water Act (CWA), the NPDES Permit Program controls water pollution by regulating point sources that discharge pollutants into waters of the United States. Point sources are discrete conveyances such as pipes or man-made ditches. Examples of pollutants include, but are not limited to, rock, sand, dirt, and agricultural, industrial, and municipal waste discharged into waters of the United States. See section 122.2 of 40 Code of Federal Regulations (C.F.R.) for the actual definitions of point source, pollutant, and water of the United States.*
> *The NPDES Program is a federal program which has been delegated to the State of California for implementation the State Water Resources Control Board (State Water Board) and the nine Regional Water Quality Control Boards (Regional through Water Boards), collectively Water Boards. In California, NPDES permits are also referred to as waste discharge requirements (WDRs) that regulate discharges to waters of the United States."*

If your business is not subject to NPDES requirements, please initial the statement below and return this form with your Business License Application.

_____I certify under penalty of perjury that my business is not subject to NPDES Requirements

If your business is subject to the NPDES permit program, you must complete the requested information below under penalty of perjury, in accordance with Business and Professions Code Section 16000.3, and return this form with your Business License Application:

> ***Business and Professions Code Section 16000.3.***
> *(a) When applying to a city for an initial business license or business license renewal, a person who conducts a business operation that is a regulated industry, as defined in Section 13383.5 of the Water Code, shall demonstrate enrollment with the National Pollutant Discharge Elimination System (NPDES) permit program by providing all of the following information, under penalty of perjury, on the initial business license or business license renewal application:*

Facility Name _____

Facility Location _____

Primary SIC Code _____

Please provide one of the following:

Waste Discharger Identification Number (WDID) _____

WDID application number _____

Notice of non-applicability identification number _____

No exposure certification identification number _____

City of Wasco

MANDATORY COMMERCIAL RECYCLING ORDINANCE

This form is required to get a business license
BUSINESS SELF-CERTIFICATION FORM

Business Information

Business Name _____

Business Owner/Authorized Designee's Name _____

Street Address (No PO Boxes) _____ APN _____

City _____ State _____ Zip _____

Mailing Address (if different) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

*If your business has an American Refuse Recycling Services **STOP** here and sign in this section below:* American Refuse Customer # _____

_____ Date _____

Signature *(American Refuse Customers Only)*

*If you are **not an American Refuse customer** please complete the remainder of this form.*

Solid Waste Estimate (includes trash, recyclable, & compostable materials)

_____ Solid Waste Collection Service:

Container Size (check all that apply): ☐ .5 cubic yard ☐ 3 cubic yards

Weekly Pick-up Frequency: ☐ 2(x) ☐ 3(x) ☐ 1(x)

Recycling Information

Materials Recycled (check all that apply):

- ☐ Cardboard
- ☐ Glass Bottles/Jars
- ☐ Aluminum Containers
- ☐ Paper (magazines, newspaper, junk mail, etc.)
- ☐ Metal/Tin/Steel Containers
- ☐ Plastics #1 - #7
- ☐ Green Waste (grass, branches)
- ☐ Other _____

Certification

I certify that the foregoing statements are true and complete and that I comply with all Recycling requirements of the City of Wasco Commercial Recycling Ordinance and State Recycling regulations.

Signature _____ Date _____

Occupancy Use Form

Date:_____

Name of Business_____ **Phone No.**_____

Street Address_____

Name of Applicant_____ **Phone No.**_____ **Floor Area**_____

Email_____

Detailed Description_____

Property Owner_____ **Phone No.**_____

OFFICE USE ONLY

BUILDING & PLANNING ONLY (REQUIRED PRIOR TO PROCEEDING WITH STEPS 1-6)

Existing Building Occupancy_____ Proposed Building Occupancy_____

Existing Land Use_____ Proposed Land Use_____

PLEASE SIGN ELECTRONICALLY AND RETURN TO COMMUNITY DEVELOPMENT DEPARTMENT WHEN COMPLETE

1. Public Works Dept. _____ Date_____ Comments_____

American Refuse Account Number: _____

Sanitation Dept: _____

Commercial Recycling Ordnance Form Completed? Yes____No_____

Container Size: ☐ .5 cubic yard ☐ 3 cubic yard

Weekly Pickup Frequency: ☐ 2(x) ☐ 5(x) ☐ 1(x)

Water Dept: _____

Is there backflow protection onsite? Yes_____No_____

If yes, is the assembly current on annual testing? Yes_____No_____Date of last testing_____

If no, does this change of occupancy require backflow protection? Yes_____No_____

Notice to Install Letter sent? Yes_____No_____

Wastewater Dept:_____

Industrial Waste Discharge Form Completed (SB 205 Compliance)? Yes_____No_____

Is an Industrial Waste Discharge Permit Applicable? Yes_____No_____Permit issued on_____

Fats, Oils, and Grease Fee Applicable? Yes_____No_____

2. Fire Dept. _____ Date_____ Comments_____
3. Health Dept. _____ Date_____ Comments_____
4. Wasco Police Dept. _____ Date_____ Comments_____
5. Building Dept. _____ Date_____ Comments_____
6. Planning Dept. _____ Date_____ Comments_____

Comments:

_____