CITY OF LEMON GROVE

3232 Main Street • Lemon Grove, CA 91945
Attn: Business License • (619) 825-3800

BUSINESS LICENSE APPLICATION

☐ New Application
☐ Change of Business Name

Business Name _____

Business Location (Not P O. Box) _____
City _____ State _____ Zip _____

Mailing Address (if Different) _____
City _____ State _____ Zip _____

Bus. Phone ( ) _____ Bus. Fax ( ) _____

E-Mail Address _____

Enter number of Employees _____

Enter number of Vehicles _____

Articles of Incorporation ☐ YES ☐ NO
Fictituous Name Filed ☐ YES ☐ NO
Business In Operation Preceding year ☐ YES ☐ NO

☐ In-City
☐ Out of City
☐ Home Occupation

Start Date _____

Description of Business _____

Ownership ☐ Corporation ☐ Ltd Liability Corp ☐ Partnership ☐ Sole Proprietor ☐ Trust

State Lic. No. _____ License Type _____ Expiration Date _____

Resale No. _____ Federal I. D. No. _____ State I. D. No. _____

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

Owner Name _____ Title _____ Phone ( ) _____
Home Address _____ Cell Phone ( ) _____
City _____ State _____ Zip _____

Owner Name _____ Title _____ Phone ( ) _____
Home Address _____ Cell Phone ( ) _____
City _____ State _____ Zip _____

In case of emergency, please contact:

Name _____ Title _____ Phone ( ) _____
Address _____ Cell Phone ( ) _____

Alarm Company (if applicable)

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

I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are true and correct.

Date: _____ Signature of Owner or Representative: _____

• OFFICIAL USE ONLY • **License Reviewed & Approved By:**

Business License No. _____
Receipt # _____
Date Paid _____
☐ Cash ☐ Check ☐ MC / VISA

Planning Dept. _____ /
Code Enforcement _____ /
Fire Dept. _____ /
COMMENTS: _____

Base Fee	$
Employee Fee	$
Per Item Fee	$
Processing Fee	$ 30.00
Storm Water Fee	$
Fire Fee	$
State CASp Fee	$ 4.00
TOTAL AMOUNT DUE	$

Name as it appears on Credit Card: _____
Account # _____
Expiration Date: _____
Amount Authorized: $ _____
Authorized Signature: _____

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/Home.aspx - The Department of Rehabilitation at www.rehab.cahwnet.gov - The California Commission on Disability Access at www.ccda.ca.gov.