



BUSINESS LICENSE TAX STATEMENT APPLICATION

CERTIFICATE PERIOD / GROSS REVENUE ESTIMATE

FROM:
(Desde)

TO: 12/31/
(Hasta)

ESTIMATED GROSS REVENUE:
(Estimado: Ingreso total en Bruto)

CITY OF SANTA PAULA • P.O. BOX 569 • SANTA PAULA, CA 93061 • (805) 933-4211 • www.ci.santa-paula.ca.us

APPLICATION INSTRUCTIONS (INSTRUCCIONES DE APLICACIÓN)

- ☐ **NEW / RELOCATED COMMERCIAL BUSINESS BASED WITHIN CITY LIMITS**
Complete this form + *Commercial Business Permit Application* and submit with fees
- ☐ **HOME OCCUPATION BUSINESS BASED WITHIN CITY LIMITS**
Complete this form + *Home Occupation Permit Application* and submit with fees
- ☐ **BUSINESS BASED OUTSIDE CITY LIMITS**
Complete this form *only* and submit with fees – CDD approval not required
- SPECIAL EVENT NAME(if applicable):** _____ **Select One*

FEES (TARIFA)

TAX FEE (CUOTA FISCAL) SECOND PAGE SEGUNDA PAGINA	PENALTY	ADJUST	CA FEE	TOTAL
			\$4	

APPLICANT INFORMATION (INFORMACIÓN DEL APLICANTE) Complete ALL Boxes-State "N/A" for Any that DO NOT Apply

Fictitious Business Name/DBA (if applicable):

(Nombre comercial ficticio/DBA (si corresponde))

Legal Owner or Corporation Name:

(Propietario legal o nombre de la corporación)

Entity Type: ☐ Sole (Único) ☐ Partnership (Asociación) ☐ Corporation* (Corporación) ☐ LLC/LLP* (LLC/LLP) ☐ 501(c)(3)* (501(c)(3))

**Attach copy of Articles of Incorporation, LLC/LLP, or 501(c)(3) verification*

City Limits: ☐ Inside (Dentro) ☐ Outside (Afuera)

Federal Tax ID No.:

(Número de identificación fiscal federal)

Board of Equalization/Resale No.:

(Número de la Junta de Igualación/Reventa)

State Employer ID No.:

(Número de identificación del empleador estatal)

State License No.:

(Número de licencia estatal)

Exp.:

(Vencimiento)

Social Security No.:

(Número de seguridad social)

Date of Birth (if required):

(Fecha de nacimiento (si es requerido))

BUSINESS INFORMATION (INFORMACIÓN DE NEGOCIOS)

Business Description:

(Descripción del negocio)

Number of Employees:

(Número de empleados)

Full Business Address:

(Dirección comercial completa)

**Cannot be a P.O. Box (No puede ser un apartado de correos)*

Business Phone:

(Número de teléfono del negocio)

Business Email:

(Correo electrónico del negocio)

Business Mailing Address (if different):

(Dirección postal del negocio (si es diferente))

Owner/Corporation Address (if different):

(Dirección del propietario / corporación (si es diferente))

Owner/Corporation Phone:

(Número de teléfono del propietario / corporación)

Owner/Corporation Email:

(Correo electrónico del propietario / corporación)

ADDITIONAL INFORMATION (INFORMACIÓN ADICIONAL)

GROUP NO.	VEHICLES	LIVING UNITS	MACHINES		
			VENDING	AMUSEMENT	MUSIC

REVISIONS TO RECEIPTS (REVISIONES DE RECIBOS)

PREVIOUS EST GROSS RECEIPTS	ACTUAL GROSS RECEIPTS

SIGNATURE (FIRMA)

By signing this statement: I/We declare, under penalty of perjury, that this certification is made by me, that I am authorized to make such statement, and to the best of my knowledge and belief it is a true, correct and complete return made in good faith for the period stated, pursuant to the provisions of the Business Tax Ordinance Code of the City of Santa Paula. I further certify there has been no change in ownership since the last application or renewal.

Applicant Signature:

(Firma del solicitante)

Date:

(Fecha)

Print Full Name:

(Imprimir nombre completo)

RATE SCHEDULE 100

BUSINESS LICENSE TAX STATEMENT

Your annual business license tax statement ("business license") fee is based off the estimated gross revenue of your business for one (1) year. Locate your estimated gross revenue figure in the table below, and enter the corresponding amount in the TAX FEE box on the front page. If you underestimate your gross revenue, the City will bill you for the difference to the correct fee amount upon renewal.

La tarifa anual de declaración de impuestos de licencia comercial ("licencia comercial") se basa en los ingresos totales estimados de su negocio durante un (1) año. Ubique su cifra de ingresos totales estimados en la tabla a continuación e ingrese el monto correspondiente en el recuadro CUOTA FISCAL en la página principal. Si subestima su ingreso total, la Ciudad le facturará la diferencia al monto correcto de la tarifa al momento de la renovación.

CODE	GROSS INCOME RANGE	FEE
110	\$39,999—Under	\$25
120	\$40,000—\$59,999	\$35
130	\$60,000—\$99,999	\$45
140	\$100,000—\$199,999	\$65
150	\$200,000—\$299,999	\$85
160	\$300,000—\$399,999	\$100
165	\$400,000—\$499,999	\$125
170	\$500,000—\$599,999	\$150
175	\$600,000—\$799,999	\$175
180	\$800,000—\$999,999	\$200
181	\$1,000,000—\$1,999,999	\$225
182	\$2,000,000—\$2,999,999	\$250
183	\$3,000,000—\$3,999,999	\$275
184	\$4,000,000—\$4,999,999	\$300
185	\$5,000,000—\$5,999,999	\$325
186	\$6,000,000—\$6,999,999	\$350
187	\$7,000,000—\$7,999,999	\$375
188	\$8,000,000—\$8,999,999	\$400
189	\$9,000,000—\$9,999,999	\$425
190	\$10,000,000—Above	\$450
+\$25 per each \$1 million additional gross receipts or fraction thereof.		
Rate Schedules 200 (Dance/Entertainment/Delivery/Miscellaneous), 300 (Rental Units), 400 (Theaters), 500 (Vending/Amusement) are applicable as required and will be provided for review as needed.		



CITY OF SANTA PAULA
APPLICABILITY FOR COVERAGE UNDER THE
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
GENERAL PERMIT FOR STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

Facilities, which industrial activities are described by one of the following criteria, are required to obtain coverage under the National Pollutant Discharge Elimination System (NPDES), General Permit for Storm Water Discharges Associated with Industrial Activities, Order No. CAS000001. For more information about business applicability, call Steve Clark at (805) 933-4212 ext. 306. More information on how to apply and complete the NPDES Permit application is available at:

http://www.waterboards.ca.gov/water_issues/programs/stormwater/industrial.shtml. Check the applicable box(es) below.

- ☐ Facilities Subject To Storm Water Effluent Limitations Guidelines, New Source Performance Standards, or Toxic Pollutant Effluent Standards Found in 40 Code of Federal Regulations, Chapter I, Subchapter N: Cement Manufacturing (40 C.F.R. Part 411); Feedlots (40 C.F.R. Part 412); Fertilizer Manufacturing (40 C.F.R. Part 418); Petroleum Refining (40 C.F.R. Part 419); Phosphate Manufacturing (40 C.F.R. Part 422); Steam Electric (40 C.F.R. Part 423); Coal Mining (40 C.F.R. Part 434); Mineral Mining and Processing (40 C.F.R. Part 436); Ore Mining and Dressing (40 C.F.R. Part 440); Asphalt Emulsion (40 C.F.R. Part 443); Landfills (40 C.F.R. Part 445); and Airport Deicing (40 C.F.R. Part 449).
- ☐ Manufacturing Facilities: Facilities with Standard Industrial Classifications (SICs) 20XX through 39XX, 4221 through 4225.
- ☐ Oil and Gas/Mining Facilities: Facilities classified as SICs 10XX through 14XX, including active or inactive mining operations (some exceptions apply; for more info visit http://www.waterboards.ca.gov/water_issues/programs/stormwater/industrial.shtml)
- ☐ Hazardous Waste Treatment, Storage, or Disposal Facilities: Hazardous waste treatment, storage, or disposal facilities, including any facility operating under interim status or a general permit under Subtitle C of the Federal Resource, Conservation, and Recovery Act.
- ☐ Landfills, Land Application Sites, and Open Dumps: Landfills, land application sites, and open dumps that receive or have received industrial waste from any facility within any other category of this Attachment; including facilities subject to regulation under Subtitle D of the Federal Resource, Conservation, and Recovery Act, and facilities that have accepted wastes from construction activities (construction activities include any clearing, grading, or excavation that results in disturbance).
- ☐ Recycling Facilities: Facilities involved in the recycling of materials, including metal scrapyards, battery reclaimers, salvage yards, and automobile junkyards, including but limited to those classified as Standard Industrial Classification 5015 and 5093.
- ☐ Steam Electric Power Generating Facilities: Any facility that generates steam for electric power through the combustion of coal, oil, wood, etc.
- ☐ Transportation Facilities: Facilities with SICs 40XX through 45XX (except 4221-25) and 5171 with vehicle maintenance shops, equipment cleaning operations, or airport deicing operations. Only those portions of the facility involved in vehicle maintenance (including vehicle rehabilitation, mechanical repairs, painting, fueling, and lubrication) or other operations identified under this Permit as associated with industrial activity.
- ☐ Sewage or Wastewater Treatment Works: Facilities used in the storage, treatment, recycling, and reclamation of municipal or domestic sewage, including land dedicated to the disposal of sewage sludge, that are located within the confines of the facility, with a design flow of one million gallons per day or more, or required to have an approved pretreatment program under 40 Code of Federal Regulations part 403. Not included are farm lands, domestic gardens, or lands used for sludge management where sludge is beneficially reused and are not physically located in the confines of the facility, or areas that are in compliance with Section 405 of the Clean Water Act.
- ☐ Business is subject to the NPDES Permit as indicated above. Its WDID is _____ or Application Number is _____. Alternatively, business has received the following NONA number _____ or NEC number _____.
- ☐ None of the above; my business is not subject to coverage under the NPDES Permit.

As a business owner, I certify that the provided business information is correct and accurate.

Business Name: _____

Business Address: _____

Business Assessor's Parcel Number: _____

Business Owner Name: _____

Business Owner Signature: _____ **Date:** _____