



City of Temple City  
Community Development Department

## BUSINESS BY VEHICLE APPLICATION

### BUSINESS INFORMATION

Business Name: \_\_\_\_\_  
Corporation Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_ Website: \_\_\_\_\_  
Business Description: \_\_\_\_\_  
\_\_\_\_\_

### ADDITIONAL INFORMATION

Type of Ownership: Sole Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ LLC \_\_\_\_\_ Corporation \_\_\_\_\_  
Federal ID Number/SSN: \_\_\_\_\_ State Employee ID Number: \_\_\_\_\_  
State License: \_\_\_\_\_ Type: \_\_\_\_\_ Expiration: \_\_\_\_\_  
Sellers Permit: \_\_\_\_\_ Employees Over 20 Hours: \_\_\_\_\_

### OWNER INFORMATION (ATTACH LIST FOR ADDITIONAL OWNERS)

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
California Drivers License: \_\_\_\_\_ SSN: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
California Drivers License: \_\_\_\_\_ SSN: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### VEHICLE INFORMATION (ATTACH LIST FOR ADDITIONAL VEHICLES)

Model/Make: \_\_\_\_\_  
License Plate: \_\_\_\_\_ State: \_\_\_\_\_ VIN: \_\_\_\_\_  
Model/Make: \_\_\_\_\_  
License Plate: \_\_\_\_\_ State: \_\_\_\_\_ VIN: \_\_\_\_\_

**DISABILITY ACCESS INFORMATION**

UNDER FEDERAL AND STATE LAW, COMPLIANCE WITH DISABILITY ACCESS LAWS IS A SERIOUS 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 BELOW:

**DIVISION OF THE STATE ARCHITECT:** [www.dgs.ca.gov/dsa/home.aspx](http://www.dgs.ca.gov/dsa/home.aspx) **DEPARTMENT OF REHABILITATION:** [www.rehab.cahwnet.gov/](http://www.rehab.cahwnet.gov/) **CALIFORNIA COMMISSION ON DISABILITY ACCESS:** [www.cdda.ca.gov](http://www.cdda.ca.gov)

**CONDITIONS OF AGREEMENT**

A Business License is issued to the business owner providing a proposed use is permitted and all general requirements, applicable regulations, and conditions of approval are satisfied. A business must carry a valid Temple City Business License prior to operation. All approved Business Licenses are subject to any applicable requirements pursuant to the Temple City Municipal Code (TCMC). The Business License expires December 31st of each year. A courtesy renewal notice will be sent however, fees are still due even if the notice is not received. Failure to pay an annual license tax when due, the license collector shall add a penalty of ten percent of said license tax on the thirtieth day of each month after the due date thereof.

*Initial here* \_\_\_\_\_

Under the provisions of Section 3700 of the California Labor Code, I am required to carry Workers Compensation insurance for my employees at all times. I hereby certify that I will carry Workers Compensation insurance for my employees at all times.

*Initial here* \_\_\_\_\_

I declare under penalty of perjury that the information contained herein is true and correct to the best of my knowledge and belief. As a condition for the issuance of the certificate applied for, I must agree to submit any additional information that may be required; conduct all phases of this business in accordance with regulations established for such business and to maintain all personnel, vehicles, and/or equipment that may be used in connection therewith, in conformance with all applicable laws, ordinances, and regulations.

*Initial here* \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (*print or type*): \_\_\_\_\_

Phone: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Business License: \$ _____	Amount Received: \$ _____	Planning: _____
Employee/Owner: \$ _____	Payment Type: _____	Building & Code: _____
Background: \$ _____	Receipt: _____	Business License: _____
CAsp Fee: \$ 4.00 _____	Date: _____	Comments: _____
<b>Total: \$ _____</b>	File/Resolution: _____	_____



City of Temple City

## BUSINESS LICENSE CHECKLIST

THIS CHECKLIST WILL BE USED BY STAFF TO DETERMINE IF AN APPLICATION CONTAINS THE APPROPRIATE REQUIREMENTS TO BEGIN THE APPLICATION PROCESS. ALL ITEMS LISTED BELOW MUST BE INCLUDED. IF ANY ITEMS ARE NOT INCLUDED THE PROJECT WILL NOT BE ACCEPTED FOR SUBMITTAL.

### MINIMUM APPLICATION FILING REQUIREMENTS

- Completed *Business License Application*
- Background Investigation - Live Scan Request Form and Personal Information Form for each driver
- Copy of Drivers License of each driver
- Copy of Vehicle Registration for each vehicle