



City of Brisbane, CA (9915) Application For New Business License

License Date: _____ - _____ Application Date: ____/____/____

Remit To: City of Brisbane • c/o MuniServices, LLC • 438 East Shaw Ave Box 367 • Fresno, CA 93710
Toll Free Phone: (866) 240-3665 • Fax: (855) 219-4338 • Email: bizlicensesupport@muniservices.com
Online filing available at: <https://Brisbane.BizLicenseOnline.com>

Licenses will be issued upon receipt of all information, payment, and required approvals.

New businesses and/or change of location within Brisbane city limits, please contact the Fire Inspector directly:
Clyde Preston--Email: cpreston@northcountyfire.org, phone: (650) 991-5741.

TYPE OF APPLICATION

Select the one that best applies based on your business category/description. Refer to the Fee Schedule at www.revds.com.

- New Annual License Application New Semi Annual License Application New Quarterly License Application
- Change of Ownership Change of Address Change of Business Name (FEIN Change Only)

BUSINESS INFORMATION

Legal Business Name: _____ Federal ID #: _____

DBA (Doing Business As): _____ Total Number of Employees in Brisbane: _____

Business Phone: _____ Alternate Phone: _____ Fax: _____

Business Physical Location: _____
(Street-No PO Box) (City) (State) (Zip)

Business Mailing Address: _____
(Address or PO Box) (City) (State) (Zip)

Ownership Type: Sole Proprietorship (Individual) General Partnership Corporation LLC LLP Trust

Please describe your business activity in detail: _____

Business email: _____ Business website: _____

Contractor State License #: _____ State Employer ID # _____ Sales Tax Resale # _____

Date Business Began in Brisbane: ____/____/____

OWNER INFORMATION

Use separate sheet of paper with additional owners' information if necessary.

Owner #1 Name: _____
(First Name) (Middle Initial) (Last Name)

Owner #1 Address: _____
(Street-No PO Box) (City) (State) (Zip)

Owner #1 Cell Phone: _____ Owner #1 Phone: _____ Owner #1 SSN: _____

Owner #2 Name: _____
(First Name) (Middle Initial) (Last Name)

Owner #2 Address: _____
(Street-No PO Box) (City) (State) (Zip)

Owner #2 Cell Phone: _____ Owner #2 Phone: _____ Owner #2 SSN: _____

INFORMATION REGARDING CALIFORNIA SB-1186 AND ASSEMBLY BILL 1379

CASp Fee: On September 19, 2012, Governor Brown signed Senate Bill 1186 (SB 1186) into law. SB 1186 is intended to increase disability access, encourage compliance with construction-related accessibility requirements, develop education resources for businesses, and facilitate compliance with Federal and State disability laws. From January 1, 2013, and until December 31, 2017, cities and counties were required to collect a State mandated fee of \$1.00 from "any applicant for a local business license or equivalent instrument or permit, and from any applicant for the renewal of a business license or equivalent instrument or permit." Assembly Bill 1379 was passed on October 11, 2017 which extends the assessment of the fee indefinitely and also the State mandated fee from \$1.00 to \$4.00 from January 1, 2018 until December 31, 2023. The City is required by law to inform you of the following: 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: <http://www.dgs.ca.gov/dsa/Home.aspx>; The Department of Rehabilitation at: <http://www.rehab.cahwnet.gov/>; The California Commission on Disability Access at: <http://www.cdda.ca.gov>.

CALCULATE LICENSE AMOUNT DUE

Check here if exempt from the business license fee, and skip to Sworn Statement at the bottom of this application. Proof of exemption is required.

Step 1: Enter the total amount of employees in the City of Brisbane: (1) _____
"Employee" means all persons engaged in the operation or conduct of any business, whether the owner, a member of the owner's family, partner, agent, manager, solicitor and any and all other persons employed or working in the business.

Step 2: Calculate license tax due (required for all applicants):

Business Classification	Business Description	Gross Receipts <i>(if applicable)</i>	Other Calculation Method <i>(if applicable)</i>	Flat Fee Amount <i>(if applicable)</i>	License Tax Due
		\$		\$	\$
		\$		\$	\$
		\$		\$	\$

Instructions for Calculating License Tax –

- See City of Brisbane, CA Business License Tax Fee Schedule and Tax Calculation Tables for a list of businesses classifications, descriptions and tax rates, at www.revds.com.
- The Other Calculation Method column may be used for licenses based on the number of units: i.e. employees, persons, square footage, etc. Must report the amount of units required for calculation under the Other Calculation Method column. Failure to include the number of units may cause delays during processing of your application.

Step 3: Is this a Home Based Business: Yes No

Step 4: Home Occupation Permit *(If applicable)*
 Add \$29.00 if "Yes" was answered on Step 3. (4) \$ _____

Step 5: Is the business location within Brisbane city limits: Yes No

Step 6: Fire Inspection Fee *(Not applicable to Home Based Businesses)*
 Add if "Yes" was answered on Step 5. See applicable fees below. (6) \$ _____

Step 7: Add CA Senate Fee SB-1186 *(required)*: (7) \$ 4.00

Step 8: Total Amount Due *(Sum amounts from Steps 2 through 8)*: (8) \$ _____

Make check payable to: Tax Trust Account

FIRE INSPECTION FEES

New Business Fire Inspection Fees:	Minimum Fee	\$62.00	5,001 – 10,000 square ft.	\$142.00
	10,001 – 25,000 sq. ft.	\$190.00	greater than 25,000 square ft.	\$283.00

SWORN STATEMENT

I acknowledge that the City of Brisbane's issuance of a Business License and payment of Business License Tax does not entitle me/authorized representative to conduct any business in the City that is in violation of any applicable laws. I further acknowledge that the City of Brisbane's issuance of a Business License does not waive the City of Brisbane's right in any way to enforce compliance with applicable laws against me/authorized representative. I hereby certify, under penalty of perjury, that the information in this application is true, correct, and complete to the best of my knowledge and belief. I agree to comply with all applicable laws and ordinances regulating the operation of this business.

 Signature of Business Owner/Authorized Representative Printed Name Date

Returned Check Disclaimer: Effective July 1, 2010, each returned item received by MUNISERVICES, LLC due to insufficient funds will be electronically represented to the presenters' bank no more than two times in an effort to obtain payment. MUNISERVICES, LLC is not responsible for any additional bank fees that will accrue due to the submission of the returned item. Please see the full returned check policy at www.revds.com/taxpayer/return-check-disclaimer.