



City of Hercules, CA (9936)
Annual Renewal - MISCELLANEOUS BUSINESS AND PROFESSIONALS

Delinquent Date: Delinquent if paid on or after February 1st
 Online Filing Available at: **Coming Soon!**

Remit To: City of Hercules • 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

MuniServices Account #: _____

License Year: 20 _____

Business Name _____

Location Address _____

DBA _____

Mailing Address _____

Section 1 – Workman’s Comp Information

Does your business currently employ individuals working in the City of Hercules? Yes No

Workman’s Comp Carrier _____ WC Policy # _____ WC Exp Date: _____

Check here if you are exempt from the worker’s compensation requirement. By doing so, you are certifying under penalty of perjury under the laws of the State of California that the information provided on this exemption statement is true and accurate.

Section 2 – Business License Calculation – ANNUAL RENEWAL REQUIRED

Use this form for RENEWALS only. All NEW businesses must complete a new application.

Select One	Business Description	Fee Calculation Instructions
<input type="checkbox"/>	Code 3.01-Billiard or Pool Halls and Card Rooms	\$21.00 per year per table, PLUS must pay based on average monthly gross receipts using gross receipts fee table enclosed. Must report both average monthly gross receipts and # of tables.
<input type="checkbox"/>	Code 3.06-Coin Operated Amusement Devices	\$204.00 per year per device. Must report # of devices as “units”.
<input type="checkbox"/>	Code 3.09-Farmers Market	\$16.00 per year
<input type="checkbox"/>	Code 3.12-Professional (i.e. Accountant, Chiropractor, Dentist, Engineer, Lawyer, Optometrist, Osteopath, Physician, Surgeon, Veterinarian, Mortician, etc.)	\$164.00 per each professional per year. Must report # of professionals as “units”.
<input type="checkbox"/>	Code 3.13-Professional HOME OCCUPATION (i.e. Accountant, Chiropractor, Dentist, Engineer, Lawyer, Optometrist, Osteopath, Physician, Surgeon, Veterinarian, Mortician, etc.)	\$164.00 per each professional per year. Must report # of professionals as “units”.
<input type="checkbox"/>	Code 3.14-Selling Bankrupt, Depreciated or Damaged Stock of Goods	\$408.00 per year
<input type="checkbox"/>	Code 3.20-Trucks Using City Streets	\$103.00 per truck per year. Must report # of trucks as “units”.
<input type="checkbox"/>	Code 3.21-Vending Machines	\$42.00 per year per machine. Must report # of machines as “units”.

1) Report average monthly gross receipts if required: (1) \$ _____

2) Report # of units if required (tables, devices, professionals, truck, machine, etc.): (2) _____

3) Calculate license fee due using the above fee schedule. (3) \$ _____

4) Add Penalty if paid on or after February 1st of license year. (4) \$ _____

Calculation: Amount from line 3 x 25% x number of months late; Max 100%

5) Add CASp fee. (required): (5) \$ 4.00 _____

6) TOTAL AMOUNT DUE: (6) \$ _____

Sum lines 3, 4 and 5.

Make check payable to: Tax Trust Account

Section 3 – Chemical or Hazardous Waste Materials

Select One:

- This business WILL NOT handle or store chemical or hazardous waste materials.
- This business IS LICENSED AND QUALIFIED to handle chemical or hazardous waste materials.

Section 4 – Sworn Statement

I acknowledge that the City of Hercules’ 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 Hercules’ issuance of a Business License does not waive the City of Hercules’ 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 _____ Printed Name _____ Title _____ Date _____ Phone _____

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.



Remit To: City of Hercules • 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

Fee Schedule for Billiard or Pool Halls and Card Rooms Only

INSTRUCTIONS: THE BELOW RATES ARE FOR **BILLIARD OR POOL HALLS AND CARD ROOMS RENEWALS ONLY**.
 ALL NEW BUSINESSES MUST USE THE NEW BUSINESS APPLICATION.

AVERAGE MONTHLY Gross Receipts Range	License Fee Due
\$0.00 to \$1,000	\$42.00
\$1,000.01 to \$1,500	\$52.00
\$1,500.01 to \$2,000	\$62.00
\$2,000.01 to \$3,000	\$82.00
\$3,000.01 to \$4,000	\$103.00
\$4,000.01 to \$5,000	\$123.00
\$5,000.01 to \$6,000	\$143.00
\$6,000.01 to \$8,000	\$164.00
\$8,000.01 to \$10,000	\$184.00
\$10,000.01 to \$12,000	\$204.00
\$12,000.01 to \$14,000	\$225.00
\$14,000.01 to \$16,000	\$245.00
\$16,000.01 to \$18,000	\$265.00
\$18,000.01 to \$20,000	\$286.00
\$20,000.01 to \$25,000	\$326.00
\$25,000.01 to \$30,000	\$367.00
\$30,000.01 to \$35,000	\$408.00

AVERAGE MONTHLY Gross Receipts Range	License Fee Due
\$35,000.01 to \$40,000	\$448.00
\$40,000.01 to \$45,000	\$489.00
\$45,000.01 to \$50,000	\$530.00
\$50,000.01 to \$60,000	\$571.00
\$60,000.01 to \$70,000	\$611.00
\$70,000.01 to \$80,000	\$652.00
\$80,000.01 to \$90,000	\$693.00
\$90,000.01 to \$100,000	\$733.00
\$100,000.01 to \$130,000	\$815.00
\$130,000.01 to \$160,000	\$896.00
\$160,000.01 to \$200,000	\$1,018.00
\$200,000.01 to \$350,000	\$1,221.00
\$350,000.01 to \$500,000	\$1,425.00
\$500,000.01 to \$650,000	\$1,730.00
\$650,000.01 to \$800,000	\$2,035.00
\$800,000.01 to \$1,000,000	\$2,442.00

AVERAGE MONTHLY Gross Receipts Range	Base Fee
\$1,000,000.01 to \$2,000,000 (Base Fee + \$1.00 per \$1,000 in excess of \$1M up to \$2M)	\$2,442.00
\$2,000,000.01 to \$4,000,000 (Base Fee + \$.80 per \$1,000 in excess of \$2M up to \$4M)	\$3,459.00
\$4,000,000.01 to \$7,000,000 (Base Fee + \$.60 per \$1,000 in excess of \$4M up to \$7M)	\$5,086.00
\$7,000,000.01 to \$10,000,000 (Base Fee + \$.40 per \$1,000 in excess of \$7M up to \$10M)	\$6,917.00
Over \$10,000,000 (Base Fee + \$.20 per \$1,000 in excess of \$10M with no cap)	\$8,137.00