



# City of Brisbane, CA (9915)

## Application For New Business License

Online filing available at: <https://Brisbane.BizLicenseOnline.com>

License Date: \_\_\_\_\_ - \_\_\_\_\_ Application Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Remit To: City of Brisbane • c/o Avenu Insights & Analytics • 373 East Shaw Ave Box 367 • Fresno, CA 93710

Toll Free Phone: (866) 240-3665 • Fax: (855) 219-4338 • Email: [muniblsupport@avenuinsights.com](mailto:muniblsupport@avenuinsights.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](mailto:cpreston@northcountyfire.org), phone: (650) 746-8371**

**NOTIFICATION: AREAS SHADED IN GRAY SHALL BE CONSIDERED PUBLIC INFORMATION PER THE CALIFORNIA PUBLIC RECORDS ACT AND CA. BUS. & PROF. CODE § 16000.1. If Applicant's business mailing address is a residential address, that address will be subject to public disclosure unless Applicant provides a different address (e.g. PO Box) where the Applicant consents to receive service of process.**

### TYPE OF APPLICATION

Select the one that best applies based on your business category/description. Refer to the Fee Schedule at [www.avenuinsights.com](http://www.avenuinsights.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:** \_\_\_\_\_ **Date Business Began in Brisbane:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**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)

\_\_\_\_\_ Initial here if the business physical location address provided above IS NOT a residential address.  
\_\_\_\_\_ Initial here if the business physical location site address provided above IS A RESIDENTIAL ADDRESS.

**Business Mailing Address:** \_\_\_\_\_  
(Address or PO Box) (City) (State) (Zip)

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

**FEIN:** \_\_\_\_\_ **Business email:** \_\_\_\_\_ **Business website:** \_\_\_\_\_

**Please describe your business activity in detail:** \_\_\_\_\_

**Contractor State License #:** \_\_\_\_\_ **State Employer ID #** \_\_\_\_\_ **Sales Tax Resale #** \_\_\_\_\_

**NPDES Permit Program:** If you are enrolled in the NPDES permit program, provide any of the following, as issued by the State Water Resource Control Board:

A. Waste Discharge ID No.: \_\_\_\_\_ B. Waste Discharge Application No.: \_\_\_\_\_

C. Notice of Nonapplicability No. (NONA): \_\_\_\_\_ D. No Exposure Certification No. (NEC): \_\_\_\_\_

### 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:** \_\_\_\_\_

Pursuant to CA. Bus. & Prof. Code § 16000.1, provide AT LEAST ONE of the following forms of ID (required): SSN: \_\_\_\_\_

Valid CA DL issued by DMV #: \_\_\_\_\_ Valid CA ID # issued by DMV: \_\_\_\_\_ Municipal Identification #: \_\_\_\_\_

Issued by: \_\_\_\_\_, Taxpayer ID # issued by the IRS: \_\_\_\_\_

### ADDITIONAL INFORMATION

**CASp State Mandated Disability Access/ Education 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: <https://www.dgs.ca.gov/DASA>; The Department of Rehabilitation at: <https://www.dor.ca.gov/>; The California Commission on Disability Access at: <http://www.dgs.ca.gov/CCDA>.

CALIFORNIA PUBLIC RECORDS ACT INFORMATION: <http://www.boe.ca.gov/info/publicrecords.htm>  
CALIFORNIA AB 2184: [https://leginfo.ca.gov/faces/billNavClient.xhtml?bill\\_id=201720180AB2184](https://leginfo.ca.gov/faces/billNavClient.xhtml?bill_id=201720180AB2184)

**California SB205:** On October 2, 2019, Governor Newsom signed Senate Bill 205 (SB205) into law. SB205 intends for businesses to demonstrate enrollment with the National Pollutant Discharge Elimination System (NPDES) permit program. You may obtain information about your legal obligations and how to comply with environmental laws at the following agencies: California Water Board: [https://www.waterboards.ca.gov/water\\_issues/programs/npdes/](https://www.waterboards.ca.gov/water_issues/programs/npdes/); United States Environmental Protection Agency: <https://www.epa.gov/npdes>.

**SIC codes can be found at:** <https://www.naics.com/search/>.

**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:** Is the business location within Brisbane city limits:  Yes  No

**Step 3:** Is this a business involved in the Cannabis Industry?  Yes  No

Select all that apply if business is involved in the Cannabis Industry.

Testing  Distribution  Manufacturing  Retail  Other: \_\_\_\_\_

**Step 4:** Calculate license tax due (required for all applicants):

Business Classification	Business Description	SIC Code (Required)	Gross Receipts (if applicable)	Other Calculation Method (if applicable)	Flat Fee Amount (if applicable)	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.avenuinsights.com](http://www.avenuinsights.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.
- If this is a business involved in the Cannabis Industry, see page 7 of the Business License Tax Fee Schedule and Tax Calculation Tables for a list of businesses classifications, descriptions and tax rates, at [www.avenuinsights.com](http://www.avenuinsights.com).
- Cannabis Industry businesses **MUST** include the period when the gross receipts were generated. Include the applicable period on the Other Calculation Method column using the month/year format (i.e. January-June 2020 or July – December 2020).

**Step 5:** Is this a Home Business?  Yes  No

**Step 6:** Home Occupation Permit (If applicable)  
 Add \$29.00 if business is a Home Based Business (6) \$ \_\_\_\_\_

**Step 7:** Fire Inspection Fee (Not applicable to Home Based Businesses):  
 Add the applicable fees, if business is inside city limits. See rates below. (7) \$ \_\_\_\_\_

**Step 8:** Add CA Senate Fee (required): (8) \$ \_\_\_\_\_ **4.00**

**Step 9:** Total Amount Due (Sum amounts from Steps 4 through 8): (9) \$ \_\_\_\_\_

Make check payable to: Tax Trust Account

**FIRE INSPECTION FEES**

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

**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. \*I acknowledge that whatever address has been provided by me for the purpose of legal service of process will be subject to public disclosure.

\_\_\_\_\_  
 Signature of Business Owner/Authorized Representative

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Email

\_\_\_\_\_  
 Date

**Returned Check Disclaimer:** When you make a payment by check, you authorize us to use information from your check to make a one-time electronic fund transfer from your checking account according to the terms of your check or to process that transaction as a check. When we use your check to make an electronic fund transfer, funds may be withdrawn from your checking account the same day we receive your payment, and you will not receive your check back from your financial institution. If there are insufficient funds in your checking account, you authorize us to charge a Returned Payment Fee as applicable in the amount set forth by law and collect that amount through an electronic fund transfer from your checking account, if permitted by applicable law. If another payment method is returned unpaid, by your bank, we may, if permitted by applicable law, charge a Returned Payment Fee.