



CITY OF EL CAJON - BUSINESS LICENSE

General Information and Instructions

APPLICATION PROCESS

1. When starting a new business, relocating an existing business, or operating a business out of a home/residence within the City of El Cajon, please speak with the Community Development Department-Planning Division to **determine if the proposed business and location is in compliance with applicable regulations and if additional permits/licenses are required for operating the business.**
2. Complete the business license application and pay the appropriate business tax. See instructions on completing the application. An incomplete application may delay the review and approval of the license.
3. Submit the business license application, along with the business tax payment, **by mail or in person at: City of El Cajon Finance Department, 200 Civic Center Way, El Cajon, CA 92020**
4. New business license applications with business location inside the City limits are reviewed by the Planning Division. Allow a minimum 2-3 weeks to complete the review.
5. If approved, the business license will be mailed to the business mailing address.

HOME OCCUPATION APPLICANTS – PLEASE READ

Operating a business out of a residence/home must meet the following requirements:

- There will be no signs erected or displayed on the property.
- There will be no employees except the home/business owner and/or inhabitants of the dwelling on the premises.
- There will be no storage of merchandise, equipment, or materials other than what is necessary to maintain an office.
- There will be no customer coming to the dwelling to receive the service or merchandise offered by the home occupation.
- All contacts with customers or clients take place on-site only by mail, telephone, or electronic media such as a computer/facsimile machine or entirely off-site.
- Home occupation does not create a nuisance by reason of noise, dust, odor, vibration, fumes, smoke, electrical interference or similar conflicts with compatibility
- There will be no alteration of the residential character of the premises.
- The required garage, carport or parking space for the dwelling is not converted for use in any way by the home occupation to preclude its use for parking.
- Any equipment necessary to perform the home occupation on the premises must be kept in a pickup truck or van with a maximum capacity of one ton or a trailer that can be towed by a truck or van.

BUSINESS LICENSE RATES

Generally, the following are the tax rates that apply to most businesses:

Business Classification	Business Tax Rate
Business Location <u>Inside</u> City Limits	\$40 + \$3 Per Employee + \$1 State Application Fee
Business Location <u>Outside</u> City Limits	\$60 + \$6 per Employee + \$1 State Application Fee
State-Licensed Contractor (<u>Any Location</u>)	\$70 + \$3 per Employee + \$1 State Application Fee

- For any business:
- Amusement Devices
 - Billiard/Pool Tables
- Add \$30 per Device
Add \$12 per Table

See reverse side for the business tax rates of specific businesses/activities designated in the El Cajon Municipal Code 5.08.

OVER

Business Tax Rates

(Rates are for one calendar year unless otherwise noted)

Adult Entertainment	\$45 + \$3 per Employee
Auctioneers (Inside City)	\$40 + \$3 per Employee
Billboards/Advertising Boards	\$70 per Board (up to 3)+ \$15 per additional location
Circuses/Carnivals	\$20 + \$50 per day
Mobile Home Parks	\$45 + \$3 per Space
Outcall Services for Entertainers (Inside City)	\$45 + \$3 per Employee
Outcall Services for Entertainers (Outside City)	\$65 + \$6 per Employee
Rental Units	\$40 + \$20 per Rental Unit
Solicitors/Itinerant Merchants/Peddlers (Outside City & Non-Exempt)	\$2 per Person per Day

SPECIAL OPERATION LICENSE:

Alcohol-Tobacco Free Public Dance (Class A)	\$40 + \$3 per Employee
Alcohol-Tobacco Free Public Dance (Class B)	\$30 per Day
Ambulance / Paramedic (Located Inside City)	\$40 + \$3 per Employee
Ambulance / Paramedic (Located Outside City)	\$60 + \$6 per Employee
Cabaret/Dance – Class A	\$220 + \$3 per Employee
Cabaret – Class B	\$170 + \$3 per Employee
Cabaret – Class C or Class D	\$120 + \$3 per Employee
Cabaret – Class E	\$95 + \$3 per Employee
Cabaret – Class F	\$70 + \$3 per Employee
Card Room	\$40 + \$3 per Employee
Closing Out Sale	\$45 for 60 days, \$25 for one-time 30-day renewal
Escort Service (Located Inside City)	\$45 + \$3 per Employee
Escort Service (Located Outside City)	\$65 + \$6 per Employee
Fortunetelling and Related Occupations	\$520 + \$3 per Employee
Junkyard / Auto Dismantling	\$45 + \$3 per Employee
Massage Establishment	\$45 + \$3 per Employee
Pawnbroker	\$120 + \$3 per Employee
Penny Arcade	\$40 + \$3 per Employee
Police Towing	\$40 + \$3 per Employee
Pool room / Billiards	\$20 + \$3 per Employee+ \$12 per Table
Private Patrol (Located Inside City)	\$45 + \$3 per Employee
Private Patrol (Located Outside City)	\$65 + \$6 per Employee
Public Dances	\$40 + \$3 per Employee
Secondhand Store	\$40 + \$3 per Employee
Sound Truck	\$30 per Day
Swap Meet	\$1,000 + \$3 per Employee
Vehicle For Hire (does not include Taxicabs)	\$20 + \$50 per Vehicle (up to 10)+ 1 (over 10)

For any business:

- Amusement Devices: Add \$30 per Device
- Pool Tables: Add \$12 per Table
- Firearms: Add \$5 to Base Tax Rate

Investigation Fees – Special Operation License

- Secondhand/Pawnbroker/Junkyards: \$505
- All Others: \$335

Effective January 1, 2013 California Government Code 4467 mandates The City collect a \$1.00 fee on all applicants for a business license or equivalent instrument or permit.

Notice in accordance with California Government Code 4469

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 www.dgs.ca.gov/dsa/Home.aspx.
- The Department of Rehabilitation at www.rehab.cahwnet.gov.
- The California Commission on Disability Access at www.cdda.ca.gov.

PLEASE TYPE/PRINT ALL INFORMATION LEGIBLE

Business Name: Enter complete business name. If you are doing business under a fictitious name you must file with the San Diego County Recorder's Office, Fictitious Name Department, A fictitious name is a business name that does not include the surname of the individual owner and each of the partners, or the nature of the business is not clearly evident in the name; for corporations, any name that is not the exact corporate name as listed in the articles of incorporation. **Locations:** 1600 Pacific Highway Room 260, San Diego, CA 92101; or 200 South Magnolia Ave, El Cajon, CA 92020. Phone: (619) 237-0502 (San Diego) or (619) 401-5700 (El Cajon). Internet: <https://arcc.sdcounty.ca.gov/Pages/fbn-info.aspx>

Business Location: Enter complete address of business location including unit number. Post office box and mailbox addresses may not be used. If you are conducting business from your residence and do not wish the residence address disclosed to the public, please check the box under the Signature.

Mailing Address: All correspondence and renewal notices will be sent to this address. If this space is not completed, correspondence will be mailed to your business address. **Timely renewal of your business license is your responsibility! Notices are mailed as a courtesy only. All annual business licenses expire on December 31st. Failure to receive a renewal notice does not relieve you of responsibility for penalties assessed for late payment.**

Business Start Date: List the actual date you began business in the City of El Cajon. License fees are calculated from that date and there is a penalty if delinquent.

Description of Business: Describe briefly what your business activities will be (e.g. retail sales of apparel, wholesaler of cleaning products, accounting service, etc.)

Number of Employees: Enter the total number of full and part time employees working in El Cajon. Count as employees all persons for whom you are withholding taxes. Corporate officers receiving a salary should be counted as employees.

Number of Amusement Devices/Pool Tables: Enter the total number of amusement devices and pool tables that are located at the business location, whether or not they are owned by the business. Examples would include video and pinball games, dart machines, crane machines, jukeboxes, kiddie rides, and computers used for gaming.

Number of Units/Spaces (Rentals/Mobile Homes Only): Enter the total number of rental units or mobile home spaces on property

Number of Vehicles: Enter number of vehicles that will be picking up customers in El Cajon. Taxicab companies must first obtain permission from Metropolitan Transit System (MTS) to operate in El Cajon. Attach copy of letter from MTS with your application. Phone: (619)231-1466. Internet: www.sdmts.com/Taxi/taxiHome.asp

State Contractor's License Number: Enter your current and active California license number and classification.

Federal Employer Identification Number: Contact the Internal Revenue Service at 1-800-829-3676 to request an application (Form SS-4) or download from the internet www.irs.gov/Forms-&-Pubs

Seller's Permit Number: This number is required of all businesses selling tangible personal property including retail and wholesale businesses. California Board of Equalization - 15015 Avenue of Science Suite 200, San Diego, CA 92128. Phone (858) 385-4700. Internet at www.boe.ca.gov/electsv/ereg/index.html

State Identification Number: This number is required of businesses with employees. Information available from California Employment Development Department - 10636 Scripps Summit Ct, Suite 202, San Diego, CA 92131. Phone (888) 745-3886. Internet: www.edd.ca.gov

If you are operating your business out of your home, selling tobacco, alcohol products, or firearms, check applicable boxes.

Owner Name: List one of the following) 1)Name of Corporation, Limited Partnership, or Limited Liability Company as registered with California Secretary of State; 2) Individual Names of General Partners, or Sole Proprietor; 3) Name of Trust

Information for Individuals, Officers, Partners, Managers, and Trustees: Enter individual names, titles, home address, and home phone. Social Security number only required of sole proprietors with no employees, and that do not have a federal employer identification number. Attach additional page if necessary.

Emergency Notification: Only for businesses with a business location inside the city limits. List up to two names and phone numbers of persons to be notified in after hour's emergency. For police and fire use.

Signature: Application must be signed and dated by an owner, partner, or officer.



CITY OF EL CAJON

200 Civic Center Way · El Cajon, CA 92020-3916
 Telephone (619) 441-1668

Please Check One:

- New Business
- Change of Owner
- Change of Location
- Change of Business Name

BUSINESS LICENSE APPLICATION

Please Type or Print Clearly

Business Name (DBA) _____

Business Location (Cannot be a P.O. Box. Include Suite #)

Business Phone Number
 () _____

Business Fax
 () _____

City _____ **State** _____ **Zip** _____

Mailing Address (Check if Same As Business Address)

E-Mail: _____

Web Page: _____

City _____ **State** _____ **Zip** _____

Business Start Date in El Cajon _____ **Description of Business** _____

Number of Employees _____

Number of Amusement Devices
 (If Applicable) _____

Number of Pool Tables
 (If Applicable) _____

Number of Units/Spaces
 (Rentals/Mobile Homes Only) _____

Number of Vehicles
 (Taxicabs Only) _____

State Contractor's License Number and Classification
 Number _____ Classification _____

Federal Employer Identification Number from IRS

Seller's Permit Number from Board of Equalization _____

State Identification Number from State Employment Development

Check any of the following that are applicable to your business:

- I am operating this business out of my home Selling Tobacco Products Selling Alcohol Products Selling Firearms

Ownership Information

Check one of the following:

- Sole Proprietor Husband & Wife – Sole Partnership Limited Partnership Corporation Limited Liability Company Trust

Owner Name (individual/partnership/corporate name) _____

Enter Information for Individuals, Officers, Partners, Managers, Trustees - Attach additional page if necessary

Name _____ **Title** _____

Home Address _____ **Home Phone: ()** _____

City _____ **State** _____ **Zip** _____ **Social Security No.** _____

Name _____ **Title** _____

Home Address _____ **Home Phone: ()** _____

City _____ **State** _____ **Zip** _____ **Social Security No.** _____

Emergency Notification (For City of El Cajon Businesses Only)

Name _____ **Phone ()** _____

Name _____ **Phone ()** _____

I declare under penalty of making a false statement, that I have read and completed all sections of this form to the best of my knowledge and belief, and that statements made herein are correct and true. I further acknowledge receipt of the El Cajon Business License Fact Sheet and understand issuance of the Business License does not relieve me from meeting other Municipal Code requirements.

Signature _____ **Date** _____

- Do not publish business information on the new or business active business listings.

◇ FOR CITY USE ONLY ◇

Base Tax	\$ _____	Total Paid	<input type="checkbox"/> Planning <input type="checkbox"/> Fire <input type="checkbox"/> Building
Employee/Unit Tax	\$ _____	Date Paid	<input type="checkbox"/> Special Operation <input type="checkbox"/> 5.04.100 Exempt
Device/Table Tax	\$ _____	Receipt #	Comments: _____
Penalty	\$ _____	Bus. Code _____ Fee Code _____	
TOTAL AMOUNT DUE	\$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit <input type="checkbox"/> M.O.	
Business License Number:	_____		Note: _____