

CITY OF RIO DELL
675 Wildwood Avenue
Rio Dell, CA 95562
Phone: (707) 764-3532
Fax: (707) 764-5480

PLANNING DEPARTMENT
State Board of Equalization
No. _____

APPLICATION FOR:
BUSINESS LICENSE

Please complete this form using the following criteria based on Ordinance No. 164. pertaining to businesses; the complete Ordinance may be reviewed at City Hall.

Every person who engages in business at a fixed place of business in the City, should pay a license tax based upon the immediately preceding calendar year's gross receipts or estimated gross receipts at the following rates and in the following classifications:

Classification	Yearly Gross Receipts	Annual License Fee
A	\$500.00 - \$30,000.00	\$30.00
B	In excess of \$30,000.00	\$60.00

Residential Rentals – License tax rate:

Every person, firm or corporation carrying on the business of renting two (2) or more residences and/or apartments must obtain a license at the rate of \$4.00 per unit annually or \$2.00 per mobile home.

Payment must be made before July 31 of each year or a penalty will be assessed.

I, _____ do hereby apply for a business license from the City of Rio Dell for the purpose of operating/conducting the business or profession of:

(Name of business)

(Type of business)

at: _____, APN: _____,
(Street address)

(Mailing address if different from street address)

Home Phone: _____, Business Phone: _____, Fax: _____.

CA Driver's License No. _____, or Date of Birth _____.

I do hereby swear, affirm/or estimate that the average annual gross receipts of the above business or profession to be licensed are in CLASS _____.

OR

I am hereby reporting that I receive rental income from _____ units of apartment or residences and am remitting a \$4.00 annual fee for each residence and/or \$2.00 for each mobile home.

I declare, under penalty of perjury, that the foregoing is true and correct and that this document was executed on _____, 20_____, at _____ CA.

Applicant's Signature _____

Witnessed this _____ day of _____, 20_____.

City Clerk _____

APPLICANT NOT TO WRITE IN THIS SPACE

Business License Staff Review:

City Clerk's Office	Planning Dept.	Public Works Dept.	Police Dept.
Ordinance Sec. _____	Zone _____	Bldg. Inspection _____	Same as _____
Annual Tax Due _____	Use Permit _____	Water Service _____	D.D.L. _____
Pro-rated tax _____	Parking _____	Sewer Service _____	Criminal _____
Health Dept. _____	Other _____	City Manager _____	

Gross Receipts:

\$500 to \$30,000

1 year	\$30.00
11 months	\$27.50
10 months	\$25.00
9 months	\$22.50
8 months	\$20.00
7 months	\$17.50
6 months	\$15.00
5 months	\$12.50
4 months	\$10.00
3 months	\$7.50
2 months	\$5.00
1 month	\$2.50

Over \$30,000

1 year	\$60.00
11 months	\$55.00
10 months	\$50.00
9 months	\$45.00
8 months	\$40.00
7 months	\$35.00
6 months	\$30.00
5 months	\$25.00
4 months	\$20.00
3 months	\$15.00
2 months	\$10.00
1 month	\$5.00

