



**CITY OF COSTA MESA**

77 Fair Dr • Costa Mesa, CA 92626  
P.O.Box 1200 • Costa Mesa, CA 92628-1200  
Phone: (714) 754-5235 • Fax: (714) 754-5149 • www.costamesaca.gov

**• FOR OFFICE USE ONLY •**

**Business License No.**  
\_\_\_\_\_

**BUSINESS LICENSE TAX APPLICATION**

**FEE MUST ACCOMPANY APPLICATION**

*• Please Check One •*

**Business Name/DBA** \_\_\_\_\_

**New Application**

**Corporate Name** \_\_\_\_\_  
(if applicable)

**Change of Owner**

**Business Location** \_\_\_\_\_  
(Cannot be Mail Box per State of California Business & Professions Code-Section 17538.5)

**Change of Ownership Type**

**Change of Business Name**

**Home Occupation**

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Website** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **No. of Employees** \_\_\_\_\_ **No. of Rental Units** \_\_\_\_\_

**Business Phone** \_\_\_\_\_ **Hours of Operation:** \_\_\_\_\_

<b>Costa Mesa Start Date</b>	<b>Description of Business:</b>
_____	_____

**Ownership**  Corporation  LLC  Partnership  Sole Proprietor  LLP

**Resale No.** \_\_\_\_\_ **FEIN / SSN** \_\_\_\_\_ **State ID No.** \_\_\_\_\_

**Contractor CA State License No.** \_\_\_\_\_ **State Lic. Type / Class** \_\_\_\_\_ **Expire Date** \_\_\_\_\_

**Enter below names of Owners, Partners, or Corporate Officers**

**1st Owner Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Home Address** \_\_\_\_\_  
(Cannot be Mail Box) (Street, City, Zip Code)

**Phone No.** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Driver's License #** \_\_\_\_\_

**2nd Owner Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Home Address** \_\_\_\_\_  
(Cannot be Mail Box) (Street, City, Zip Code)

**Phone No.** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Driver's License #** \_\_\_\_\_

**FEE CALCULATION - PLEASE SEE REVERSE FOR FEE CALCULATION AND ENTER BELOW**

Tax Calculated From Reverse \$

SB 1186 CASp Fee \$

**Total** \$

*Please return entire form with check payable to City of Costa Mesa.*

*Thank you for doing business in the City of Costa Mesa!*

Your Business License Tax Certificate will be issued under the provisions of the Municipal Code Section 9-1. You are cautioned that this License does not permit operation of a business in violation of other Municipal Code Sections.

Authorization to conduct business is not granted until issuance of the License.

I declare, under penalty of perjury, that to the best of my knowledge and belief, the statements made herein are correct and true and that acceptance of payment does not constitute approval of the Business License.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Planning Approval \_\_\_\_\_ Date Approved \_\_\_\_\_ CUP? \_\_\_\_\_

**FEE CALCULATION • PLEASE SEE REVERSE**



**CITY OF COSTA MESA**

**BUSINESS TYPE - PLEASE SELECT ONE AND ENTER ON FIRST PAGE OF APPLICATION**

BUSINESS NAME \_\_\_\_\_

<b>GENERAL BUSINESS</b>	<b>ADMINISTRATIVE OFFICE / WAREHOUSES</b>																																																								
(RETAIL, WHOLESALE, SERVICE, ETC.) ESTIMATED ANNUAL GROSS RECEIPTS _____ And circle the corresponding category below <table style="width:100%; border: none;"> <tr> <td>\$</td><td>TO</td><td>\$ 1,000.00</td><td>\$ 0.00</td></tr> <tr> <td>\$ 1,000.01</td><td>TO</td><td>\$ 25,000.00</td><td>\$ 25.00</td></tr> <tr> <td>\$ 25,000.01</td><td>TO</td><td>\$ 40,000.00</td><td>\$ 35.00</td></tr> <tr> <td>\$ 40,000.01</td><td>TO</td><td>\$ 75,000.00</td><td>\$ 45.00</td></tr> <tr> <td>\$ 75,000.01</td><td>TO</td><td>\$ 200,000.00</td><td>\$ 60.00</td></tr> <tr> <td>\$200,000.01</td><td>TO</td><td>\$ 500,000.00</td><td>\$100.00</td></tr> <tr> <td></td><td>OVER</td><td>\$ 500,000.00</td><td>\$200.00</td></tr> </table> Plus \$1.00 California State CASp Fee (see below)	\$	TO	\$ 1,000.00	\$ 0.00	\$ 1,000.01	TO	\$ 25,000.00	\$ 25.00	\$ 25,000.01	TO	\$ 40,000.00	\$ 35.00	\$ 40,000.01	TO	\$ 75,000.00	\$ 45.00	\$ 75,000.01	TO	\$ 200,000.00	\$ 60.00	\$200,000.01	TO	\$ 500,000.00	\$100.00		OVER	\$ 500,000.00	\$200.00	(Fees based on annual operating expense ONLY when no gross receipts are generated) ESTIMATED ANNUAL EXPENSES _____ And circle the corresponding category below <table style="width:100%; border: none;"> <tr> <td>\$</td><td>TO</td><td>\$ 1,000.00</td><td>\$ 0.00</td></tr> <tr> <td>\$ 1,000.01</td><td>TO</td><td>\$ 25,000.00</td><td>\$ 25.00</td></tr> <tr> <td>\$ 25,000.01</td><td>TO</td><td>\$ 40,000.00</td><td>\$ 35.00</td></tr> <tr> <td>\$ 40,000.01</td><td>TO</td><td>\$ 75,000.00</td><td>\$ 45.00</td></tr> <tr> <td>\$ 75,000.01</td><td>TO</td><td>\$ 200,000.00</td><td>\$ 60.00</td></tr> <tr> <td>\$200,000.01</td><td>TO</td><td>\$ 500,000.00</td><td>\$100.00</td></tr> <tr> <td></td><td>OVER</td><td>\$ 500,000.00</td><td>\$200.00</td></tr> </table> Plus \$1.00 California State CASp Fee (see below)	\$	TO	\$ 1,000.00	\$ 0.00	\$ 1,000.01	TO	\$ 25,000.00	\$ 25.00	\$ 25,000.01	TO	\$ 40,000.00	\$ 35.00	\$ 40,000.01	TO	\$ 75,000.00	\$ 45.00	\$ 75,000.01	TO	\$ 200,000.00	\$ 60.00	\$200,000.01	TO	\$ 500,000.00	\$100.00		OVER	\$ 500,000.00	\$200.00
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<b>SHOW / EXHIBITION / SWAP MEET</b>	<b>CALIFORNIA LICENSED CONTRACTOR</b>																																																								
PROMOTER'S ANNUAL GROSS RECEIPTS \$ _____  PLUS # OF SELLERS @ \$5.00 EACH EQUALS TOTAL TAX DUE \$ _____  Plus \$1.00 California State CASp Fee (see below)	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">\$50.00</td> </tr> <tr> <td style="text-align: center;">Plus \$1.00 California State CASp Fee (see below)</td> </tr> <tr> <td style="background-color: #cccccc;"><b>TAXI CABS</b></td> </tr> <tr> <td style="text-align: center;">\$50.00</td> </tr> <tr> <td style="text-align: center;">Plus \$1.00 California State CASp Fee (see below)</td> </tr> </table>	\$50.00	Plus \$1.00 California State CASp Fee (see below)	<b>TAXI CABS</b>	\$50.00	Plus \$1.00 California State CASp Fee (see below)																																																			
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<b>VEHICLE WHEEL, TOW TRUCK, BUS</b>	<b>TAX EXEMPT ORGANIZATION</b>																																																								
\$25.00 PER VEHICLE \$ _____ Plus \$1.00 California State CASp Fee (see below)	PLEASE ATTACH PROOF OF EXEMPTION																																																								
<p><b>\$1 Fee - SB 1186</b></p> <p>On September 19, 2012, Governor Brown signed into law SB-1186 which adds a state fee of \$1 on any applicant for a local business license or similar instrument or permit, or renewal thereof. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop educational resources for businesses in order to facilitate compliance with federal and state disability laws, as specified.</p> <p>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 :</p> <p style="text-align: center;">       The Division of the State Architect at <a href="http://www.dgs.ca.gov/dsa/Home.aspx">www.dgs.ca.gov/dsa/Home.aspx</a>        The Department of Rehabilitation at <a href="http://www.rehab.cahwnet.gov">www.rehab.cahwnet.gov</a>        The California Commission on Disability Access at <a href="http://www.cdda.ca.gov">www.cdda.ca.gov</a> </p>																																																									