



# CITY OF LEMON GROVE

3232 Main Street • Lemon Grove, CA 91945  
Attn: Business License • (619) 825-3800

## BUSINESS LICENSE APPLICATION

- New Application
- Change of Business Name

|  |  |  |
|--|--|--|
| <b>Business Name</b> _____<br><b>Business Location</b> _____<br><small>(Not P.O. Box)</small><br>City _____ State _____ Zip _____<br><b>Mailing Address</b> _____<br><small>(if Different)</small><br>City _____ State _____ Zip _____<br><b>Bus. Phone</b> ( ) _____ <b>Bus. Fax</b> ( ) _____<br><b>E-Mail Address</b> _____ | <b>Enter number of Employees</b><br><div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>  | <b>Enter number of Vehicles</b><br><div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> |
|  | <b>Articles of Incorporation</b> <input type="checkbox"/> YES <input type="checkbox"/> NO<br><b>Fictitious Name Filed</b> <input type="checkbox"/> YES <input type="checkbox"/> NO<br><b>Business In Operation Preceding year</b> <input type="checkbox"/> YES <input type="checkbox"/> NO |  |
|  | <input type="checkbox"/> In-City<br><input type="checkbox"/> Out of City<br><input type="checkbox"/> Home Occupation   |  |

|                         |                                      |
|-------------------------|--------------------------------------|
| <b>Start Date</b> _____ | <b>Description of Business</b> _____ |
|-------------------------|--------------------------------------|

**Ownership**  Corporation  Ltd Liability Corp  Partnership  Sole Proprietor  Trust

**State Lic. No.** \_\_\_\_\_ **License Type** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**Resale No.** \_\_\_\_\_ **Federal I. D. No.** \_\_\_\_\_ **State I. D. No.** \_\_\_\_\_

**Enter below names of Owners, Partners, or Corporate Officers. Use additional sheets as necessary.**

|                           |                    |                             |
|---------------------------|--------------------|-----------------------------|
| <b>Owner Name</b> _____   | <b>Title</b> _____ | <b>Phone</b> ( ) _____      |
| <b>Home Address</b> _____ |                    | <b>Cell Phone</b> ( ) _____ |
| City _____                | State _____        | Zip _____                   |
| <b>Owner Name</b> _____   | <b>Title</b> _____ | <b>Phone</b> ( ) _____      |
| <b>Home Address</b> _____ |                    | <b>Cell Phone</b> ( ) _____ |
| City _____                | State _____        | Zip _____                   |

**In case of emergency, please contact:**

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ **Cell Phone** ( ) \_\_\_\_\_

**Alarm Company (if applicable)**

**Name** \_\_\_\_\_ **Phone No.** ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ **License No.** \_\_\_\_\_

I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are true and correct.

**Date:** \_\_\_\_\_ **Signature of Owner or Representative:** \_\_\_\_\_

|   |  |   |
|---|--|---|
| <b>• OFFICIAL USE ONLY •</b>  | <b>License Reviewed &amp; Approved By:</b> |   |
| <b>Business License No.</b> _____   | <b>Planning Dept.</b> _____ / _____        | <b>Base Fee</b> \$ _____                    |
| <b>Receipt #</b> _____  | <b>Code Enforcement</b> _____ / _____      | <b>Employee Fee</b> \$ _____                |
| <b>Date Paid</b> _____  | <b>Fire Dept.</b> _____ / _____            | <b>Per Item Fee</b> \$ _____                |
| <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> MC / VISA | <b>COMMENTS:</b> _____                     | <b>Processing Fee</b> \$ _____ <b>30.00</b> |
| <b>Name as it appears on Credit Card:</b> _____   |  | <b>Storm Water Fee</b> \$ _____             |
| <b>Account #</b> _____  |  | <b>Fire Fee</b> \$ _____                    |
| <b>Expiration Date:</b> _____   |  | <b>TOTAL AMOUNT DUE</b> \$ _____            |
| <b>Amount Authorized:</b> \$ _____  |  |   |
| <b>Authorized Signature:</b> _____  |  |   |

**MAKE CHECK PAYABLE TO THE CITY OF LEMON GROVE**

**CITY OF LEMON GROVE  
SCHEDULE OF ANNUAL BUSINESS LICENSE FEES**

|  |              |   |               |   |              |
|--|--------------|---|---------------|---|--------------|
| <b>FIXED LOCATION IN CITY (IN-CITY)</b>      |              | <b>BILLBOARD ADVERTISING</b>                              |               | <b>PROFESSION</b>                       |              |
| Base Fee                                     | \$ 15.00     | Base Fee  | \$ 100.00     | Base Fee                                | \$ 25.00     |
| Employee Charge                              | \$ 2.00 each | Three (3) or more   | \$ 10.00 each | Employee Charge                         | \$ 2.00 each |
| (Maximum Employee Charge =\$100.00)          |              | <b>BOWLING ALLEY</b>                                      |               | (Maximum Employee Charge=\$100.00)      |              |
| <b>APARTMENTS</b>                            |              | Base Fee  |               | <b>REAL ESTATE BROKER</b>               |              |
| Per Unit (Min. fee = \$10)                   | \$ 3.00 each | Per Lane  |               | Base Fee                                |              |
| <b>NO FIX LOCATION IN CITY (OUT-OF-CITY)</b> |              | \$ 15.00  |               | Per Salesman                            |              |
| Wholesalers/Licensed Contractors             |              | \$ 10.00  |               | \$ 15.00                                |              |
| Base Fee                                     | \$ 15.00     | <b>CIRCUS/CARNIVAL</b>                                    |               | \$ 10.00                                |              |
| Employee Charge                              | \$ 2.00 each | \$ 250.00   |               | <b>SHOOTING GALLERIES/ARCADE</b>        |              |
| (Maximum Employee Charge =\$100.00)          |              | COIN OPERATED VENDING MACHINES                            |               | Amusement Center                        |              |
| All Other Services                           |              | Base Fee  |               | \$ 100.00                               |              |
| Base Fee                                     | \$ 40.00     | Per Machine   |               | <b>TAXI CABS/VEHICLES FOR HIRE</b>      |              |
| Employee Charge                              | \$ 2.00 each | \$ 25.00  |               | In City                                 |              |
| (Maximum Employee Charge =\$100.00)          |              | \$ 2.00   |               | Outside City                            |              |
| <b>RETAIL ROUTE DELIVERIES</b>               |              | <b>ICE CREAM CARTS, WAGONS/<br/>FOOD VENDING VEHICLES</b> |               | TRAILER PARK                            |              |
| Base Fee Per Vehicle                         | \$ 40.00     | Per Vehicle   |               | Base Fee                                |              |
| <b>AMUSEMENT/MECHANICAL/MUSIC</b>            |              | \$ 200.00   |               | \$ 15.00                                |              |
| Each Machine                                 | \$ 25.00     | <b>PAWNBROKERS</b>  |               | Per Space                               |              |
| <b>AUCTION</b>                               |              | \$ 100.00   |               | \$ 2.00 each                            |              |
| <b>ACTIONEER</b>                             |              | <b>PEDDLERS, SOLICITORS,<br/>TRANSIENT MERCHANT</b>       |               | <b>OTHER CHARGES</b>                    |              |
| \$ 150.00                                    |              | Fixed Location On Tax Roll                                |               | <b>PROCESSING FEE</b>                   |              |
| \$ 75.00                                     |              | No Fixed Location On Tax Roll                             |               | Annual for All Businesses               |              |
|  |              | \$ 10.00  |               | \$ 30.00                                |              |
|  |              | \$ 15.00  |               | <b>STORM WATER FEE</b>                  |              |
|  |              | <b>POOL ROOMS, BILLARD</b>                                |               | Varies - see "Storm Water Fee Schedule" |              |
|  |              | Base Fee  |               | <b>FIRE INSPECTION FEE</b>              |              |
|  |              | \$ 15.00  |               | Varies - see "Fire Fee Schedule"        |              |
|  |              | Per Table   |               | <b>DUPLICATE LICENSE</b>                |              |
|  |              | \$ 10.00  |               | \$ 2.00                                 |              |
|  |              |   |               | <b>BUSINESS NAME CHANGE</b>             |              |
|  |              |   |               | \$ 2.00                                 |              |

**HOME OCCUPATION - GENERAL INFORMATION**

**Description of Proposed Business:**

- Describe any product to be manufactured or assembled. \_\_\_\_\_
- Describe materials or supplies to be stored in or at your home. \_\_\_\_\_
- Describe any service you will provide. \_\_\_\_\_
- Describe any machinery or equipment to be used (type, size, number, horsepower.) \_\_\_\_\_
- Please give any additional details to fully describe the nature of the proposed business. Attach an additional page if necessary.  
\_\_\_\_\_
- Approximately what percentage of the floor area of your home will be used in the home occupation. \_\_\_\_\_
- During what hours of the day will the home occupation be conducted. \_\_\_\_\_
- If any vehicles will be used in the conduct of your home occupation, please describe them (number, size, capacity, intended use, etc.) \_\_\_\_\_
- If you anticipate commercial deliveries or pick-up of items produced on the premises, please describe the type of commercial carrier and the frequency of deliveries and pick-ups.  
\_\_\_\_\_

Do all the persons who are employed in the home occupation live in your home?  YES  NO

Will there be any visible evidence that you are conducting a home occupation which can be seen from a public street, sidewalk or adjoining nearby properties?  YES  NO

Will the home occupation generate sounds which can be heard outside the walls of your home?  YES  NO

If the answer to the above question is yes, will such sounds be audible between the hours of 8 PM and 8 AM?  YES  NO

Will equipment used by you have the potential to disrupt or adversely effect radio and television reception in the neighborhood?  YES  NO

Will the home occupation change the appearance of your home and will there be any indication the dwelling is being used for anything other than a residential purpose?  YES  NO

Do you intend to conduct sales or offer some service in your home or within your residential property?  YES  NO

Will you offer any items for rent?  YES  NO

Do you intend to advertise your home occupation?  YES  NO

**IF YOU ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, PLEASE EXPLAIN IN DETAIL YOUR REASONS FOR YOUR AFFIRMATIVE RESPONSE(S). PLEASE USE AN ADDITIONAL PAGE**

**I declare under the penalty of perjury that the foregoing information is true and correct.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_