



CITY OF IMPERIAL BEACH  
 825 Imperial Beach Blvd.  
 Imperial Beach, CA 91932  
 T. (619) 628-1423 F. (619) 424-3481

**BUSINESS LICENSE APPLICATION  
 In City Business Address**

FEES ARE NON-REFUNDABLE

**NOTE: ALL APPLICABLE QUESTIONS MUST BE ANSWERED OR APPLICATION WILL BE REJECTED  
 IMPORTANT – PLEASE READ!!**

**It is highly recommended you verify compliance with City zoning, building and sign regulations before applying for a Business License, as the issuance of a Business License does not guarantee your business meets applicable regulations. It is the business owner's responsibility to verify with Planning and Building Departments that all applicable zoning, building, and signage codes are met before conducting business. If your business is found to be in non-compliance with any code or regulation you may receive a citation and/or your Business License may be rescinded without a refund.**

I have read the above statement \_\_\_\_\_ (Applicant's Initials)

NEW BUSINESS    CHANGE OF ADDRESS    CHANGE OF OWNERSHIP    CHANGE OF BUSINESS NAME    RENEWAL

1. Business Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

2. Business Address: \_\_\_\_\_ Email \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

4. Description of business activities (use reverse side if more space needed): \_\_\_\_\_

Contractor    Professional    Broker    Pawnbroker/Secondhand    Massage/HHP    Retail    Food Service    Other \_\_\_\_\_

License No. \_\_\_\_\_ Exp Date: \_\_\_\_\_ Classification \_\_\_\_\_

5. Structure of Business:    Corporation    Single Ownership    Partnership    Trust    Limited Liability

Will you have:    Entertainment/Band/DJ/Dancers    Dancing    Alcohol    Amplified Sound    Tobacco Paraphernalia    Other \_\_\_\_\_

6. Number of Employees: \_\_\_\_\_

7. FEDERAL I.D./Social Security # (Required) \_\_\_\_\_ STATE I.D. NO. \_\_\_\_\_ RESALE TAX NO. \_\_\_\_\_

8. Number of:   Vending Machines \_\_\_\_\_ Music \_\_\_\_\_ Game \_\_\_\_\_ Pool Tables \_\_\_\_\_ Viewers \_\_\_\_\_ Other \_\_\_\_\_

If machines are leased, name address of vendor: \_\_\_\_\_

9. If machine vendor: Please **attach list** giving type and location of all machines in the City of Imperial Beach

10. Owner Information (Required)

Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_

11. Emergency Contact: Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

12. What was the previous use of business address above: \_\_\_\_\_ Proposed date of opening \_\_\_\_\_

13. Will your business have a sign?    Yes    No – if yes, you will need a Comprehensive Sign Permit before it is installed or modified. See Planning.

14. Will you be doing any building/electrical/plumbing etc modifications?    Yes    No   **\*\* If yes, you will need a Building Permit. (see Building Dept)**

15. Have you filed a fictitious name with the county?    Yes/No   **\*\*\* Need Copy**

I HEREBY DECLARE UNDER THE PENALTY OF PERJURY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE STATEMENTS MADE HEREIN ARE CORRECT AND TRUE.

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

FINANCE DEPT. Base Fee: \$ \_\_\_\_\_ No. of Emp. \_\_\_\_\_ BID Zone \_\_\_\_\_ Fire Inspection \_\_\_\_\_ SB1186 \$1.00

LICENSE # \_\_\_\_\_ BUS CONTROL # \_\_\_\_\_

**TOTAL FEE \$ \_\_\_\_\_**





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**WORKER'S COMPENSATION DECLARATION**

I hereby affirm, under penalty of perjury, one of the following declarations:

\_\_\_\_ I have and will maintain a certificate of consent to self insure for worker's compensation, as provided by Section 3700, for the duration of any business activities conducted for which this license is issued.

\_\_\_\_ I have and will maintain worker's compensation insurance, as required by Section 3700, for the duration of any business activities conducted for which this license is issued.

My worker's compensation insurance carrier and policy number are:

Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_

\_\_\_\_ I certify in the performance of any business activities for which this license is issued I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree if I should become subject to worker's compensation provision of Section 3700 of the Labor Code, I shall forthwith comply with the provisions of Section 3700.

Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

**WARNING:** FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO \$100,000.00 IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

**SB1186 NOTICE**

As mandated by the State per SB 1186 the City of Imperial Beach is required to collect a new state-imposed \$1.00 fee from all applicants and renewal applicants for a local business license on and after January 1, 2013, and until December 31, 2018. Among other things, funds generated by this fee will be used to promote disability access and related services in the City.

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](http://www.dgs.ca.gov/dsa/Home.aspx). The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov). The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov)

\_\_\_\_\_  
*Applicant Initials*



# City of Imperial Beach, California

ADMINISTRATIVE SERVICES DEPARTMENT

825 Imperial Beach Blvd., Imperial Beach, CA 91932 Tel: (619) 628-1423 Fax: (619) 424-3481

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## 4.04.490. Business license and permit fee schedule.

A. The business license/certification fees are set as follows:

Business	License/Certification Fee
Contractor (general)	\$210 plus \$6 per employee plus \$1
Contractor (sub)	\$125 plus \$6 per employee plus \$1
Retail Outlets	\$53 plus \$6 per employee plus \$1
Wholesale Outlets	\$53 plus \$6 per employee plus \$1
Secondhand Stores/Pawn Brokers	\$420 plus \$6 per employee plus \$1
RV and Mobile Home Park	\$40 plus \$12 per unit (1 to 20 units) plus \$1
	\$40 plus \$9 per unit (21 to 50 units)
	\$40 plus \$8 per unit (51 and above)
(Housing inspection fees waived for RV and Mobile Home Park per state regulation.)	
Taxicab/Limousine	\$160 per owner or lessee plus \$1
Advertising, Billposting, Benches	\$105 per board/\$21 per bench plus \$1
Parades and Special Events	\$53 per parade or event plus \$1
Circuses, Carnivals	\$53 plus \$105 per day plus \$1
Peddlers, Telemarketing, Solicitors and Itinerant Merchants Generally (company fee)	\$105 plus \$6 per employee plus \$1 plus \$200 background check
Non-state-certified Massage Establishment/Permit	\$250 fee plus \$6 fee per employee plus \$1
Cabaret/Dancehalls	\$160 plus \$6 per employee plus \$1
Poolroom or Billiard Room	\$53 plus \$20 per table plus \$1
Consultants & Other Non-licensed Professionals	\$53 plus \$105 per professional plus \$6 per other employee plus \$1
Junkyards, Wrecking Yards or Automotive Dismantling Operation	\$160 plus \$6 per employee plus \$1
Private Patrol Service	\$53 per quarter per vehicle or employee plus \$1
Ice Cream Vendors	\$53 per quarter per vehicle or employee plus \$1 plus \$200 background check
Tattoo Parlors/Palm Readers	\$150 plus \$6 per employee plus \$1
Manufacturing	\$53 plus \$6 per employee plus \$1
Automotive Dealers, Gasoline Stations	\$53 plus \$6 per employee plus \$1
Eating and Drinking Establishments	\$53 plus \$6 per employee plus \$1
Coin-operated Viewers	\$53 per machine \$6 per employee plus \$1
Coin-operated Machines (i.e., video, music, pinball, pool)	\$20 per machine plus \$1
Check Cashing Services	\$105 plus \$6 per employee plus \$1
Credit Agencies	\$105 plus \$6 per employee plus \$1
Business Services	\$53 plus \$6 per employee plus \$1
Repair Services	\$53 plus \$6 per employee plus \$1
Amusement and Recreation	\$53 plus \$20 per machine plus \$6 per employee plus \$1
Health Service/Other Professional Services	\$53 plus \$6 per employee plus \$105 for each person engaged in a profession in a particular business that is required as a condition precedent to engaging in such profession to have a license from a government or nongovernmental agency. A licensed professional is employed or engaged in a particular occupation requiring long and intensive academic preparation in a specific field or endeavor. plus \$1
Non-state certified Massage Permit	\$75 plus \$1

**Fire Inspection Fees (\$50-\$200) & Business Improvement District Fees (\$65-\$600) also apply to a commercial businesses license with IB address. Please call for amounts 619-628-1423**