



City of Atwater

Community Pride City Wide

City of Atwater, CA Business License Information

•Zoning Clearance•

Before starting or moving a business, the owner should consult the City Planning Department to determine if the business type or use is consistent with the City zoning ordinance. Consulting the Planning Department before signing a lease or purchase agreement is a simple way to avoid potential delays and costs if your selected location is not allowed.

A business license will not be issued for any relocation or new business that is not in accordance with the City zoning ordinance.

For further assistance, please contact the Planning Department at (209) 812-1031.

•Building Permits•

A business owner must schedule an On-site inspection with the Building Department and the Fire Department before a business license and/or certificate of occupancy can be issued. This applies to new, relocating and changing of ownership of an existing business. To see the inspection checklist please visit [Business License Inspection Checklist](#)

The inspections will determine if the facility and business type meet applicable Building and Fire Code requirements. A building permit may be required for renovations, improvements, or other actions to meet code compliance as determined by the Building and/or Fire Officials.

Any identified conditions must be corrected, and the permit fees paid prior to the business license or certificate of occupancy issuance before the business can open.

For additional information on permits and fees, contact the Building Department at (209) 357-6343.

•Business License Fees•

To determine your business license tax rate for use in calculation of your business license fee, please see the City of Atwater's Business License Fee Schedule on our website at

•Proof of Certification and/or Permit•

Your license may require you to submit proof of certification and/or permit with your payment. Failure to submit proof of certification/permit, pay your license in full, or report your gross receipts as required will result in a delay of the release of your license.

•Returned Check Disclaimer•

Each returned item received by the Finance Department due to insufficient funds will be electronically represented to the presenters' bank no more than two times in an *effort* to obtain payment. The Finance Department is not responsible for any additional bank fees that will accrue due to the submission of the returned item.

•CA Senate Fee•

On September 19, 2012, Governor Brown signed Senate Bill 1186 (SB 1186) into law. SB 1186 is intended to increase disability access, encourage compliance with construction-related accessibility requirements, develop education resources for businesses, and facilitate compliance with Federal and State disability laws. From January 1, 2013, and until December 31, 2017, cities and counties were required to collect a State mandated fee of \$1.00 from "any applicant for a local business license or equivalent instrument or permit, and from any applicant for the renewal of a business license or equivalent instrument or permit." Assembly Bill 1379 was passed on October 11, 2017, which extends the assessment of the fee indefinitely and also the State mandated fee from \$1.00 to \$4.00 from January 1, 2018 until December 31, 2023. The City is required by law to inform you of the following: 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: <http://www.dqs.ca.gov/dsa/>; The Department of Rehabilitation at: <https://www.dor.ca.gov/>; The California Commission on Disability Access at: <http://www.cdda.ca.gov>. You may also visit <http://www.ci.calis1oga.ca.us/bUsinesses/state-caso-fee>.



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City of Atwater, CA Application for Business License

1. Application Type (Required): New Business Name Change Owner Change Location Change
 Seasonal Sales: Start: _____ End: _____ Application Date: ___/___/___
2. Business Name: _____ Business Phone No: _____
3. Mailing Address: _____
4. Location of Business: _____
 - Previous Address if Location Change: _____
5. Contact Name/Title: _____ Contact Phone No: _____
6. Contact Email: _____
7. Name of Business Owner or Corporation Name: _____
8. **Contractor's License:** A contractor performing work in the City of Atwater for a limited time may purchase a quarterly business license for a period of ninety (90) days. Every person engaged in the business of contracting must produce evidence that they hold a valid State Contractor's License before a business license will be issued under Atwater Municipal Code Section 5.08.090. 90-Day 1-year
 - **State Contractor's License #:** _____ **Class:** _____
9. Form of Ownership (Check One) Required: Sole Proprietorship Corporation LLC-Single Member LLC-Multi Member
 LLP (Limited Liability Partnership) General Partnership Governmental Agency Professional Association Other: _____
10. FEIN No.: _____ Sellers Permit No: _____ State Board Equalization No.: _____
11. Pursuant to CA. Bus. & Prof. Code § 16000.1, provide **AT LEAST ONE** of the following forms of ID (required):
SSN: _____ Valid CA DL / ID issued by DMV#: _____
Taxpayer ID# issued by the IRS: _____ Municipal Identification #: _____ Issued by: _____
12. Emergency Contact Information:
 - Emergency Contact: _____ Phone Number: _____
 - Emergency Contact: _____ Phone Number: _____
13. Alarm Company Information:
 - Alarm Company: _____
 - Alarm Company Phone Number: _____

FINANCE USE ONLY			
FEES FOR FY 20__ / 20__			
BUSLIC	\$	BLPEN (15%)	\$
SB1186	\$	BLAMEND	\$
BLAPP	\$	BLDUP	\$
HOP	\$	BLAPPEAL	\$
FIF	\$	UB ACCT	YES / NO / N/A
BLI	\$	TOTAL DUE:	



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Business License Operational Statement:

It is important for the Business License Operational Statement to provide a complete understanding of the business. **Please respond to all questions.**

Check all that apply: Retail Service Wholesale Financial Construction Transportation/Utility Non-Profit
 Manufacturing Cannabis Home Occupation (\$217) HOP No. _____ Other: _____

1. Description of Business: _____

_____ Initial here if the business physical location or job site address provided IS NOT a residential address.

_____ Initial here if the business physical location or job site address provided IS a residential address.

_____ Initial here if the business physical location is outside of city limits.

2. Will the business operation include any work use or storage conducted outside of a wholly enclosed building?

Yes No If yes explain: _____

3. Will the business be discharging any waste other than domestic waste to the sewer system? Yes No

4. Will the business include any processing, handling, storage or discharge of chemicals or generate hazardous waste?

Yes No If yes please list type and quantity: _____

5. Will the business operation include the selling or serving alcoholic beverages? Yes No

6. What will be the impact to city services, for example water, sewer, and garbage?

7. What type of equipment is used in your business?

8. What are the proposed hours of operation: _____

I HEREBY SWEAR THAT THE AMOUNT OF CAPITAL INVESTED OR VALUE OF GOODS, STOCKS, FURNITURE AND FIXTURES OR AMOUNT OF SALES OR RECEIPTS AS REQUIRED FOR DISCLOSURE IN ORDER TO OBTAIN A BUSINESS LICENSE HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS TRUE, CORRECT AND COMPLETE. I UNDERSTAND ISSUANCE OF LICENSE DOES NOT PERMIT BUSINESS OPERATION UNLESS BUSINESS IS PROPERLY ZONED AND/OR IN COMPLIANCE WITH ALL APPLICABLE LAWS/RULES. ANY UNPERMITTED BUSINESSES AND/OR BUSINESS ACTIVITIES ARE SUBJECT TO ENFORCEMENT PER THE PROVISIONS OF THE ATWATER MUNICIPAL CODE. *I ACKNOWLEDGE THAT WHATEVER ADDRESS HAS BEEN PROVIDED BY ME FOR THE PURPOSE OF LEGAL SERVICE OF PROCESS WILL BE SUBJECT TO PUBLIC DISCLOSURE. I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Print Name and Title: _____

Signature: _____

Email Address: _____

Contact Phone No.: _____



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Section 17.75.040 Home Occupations. The conduct of a home occupation shall be subject to the following conditions:

- a. Applications for home occupations shall be filed with the Planning Department and accompanied by such data as may be prescribed by the Commission so as to assure the fullest practicable presentation of facts for the permanent record.
- b. One home occupation permit per resident is permitted.
- c. The occupation shall be conducted entirely by resident occupants and shall not employ any person not residing in said residence.
- d. The total floor area used for the occupation including area for storage and supplies shall be limited to one fourth of the floor area of the main residence or 400 square feet whichever is lesser.
- e. Storage of goods, materials or products connected with a home occupation is limited to the main residence, subject to the floor area limitation and shall not be allowed within any accessory structure.
- f. Commercial activity such as buying or selling a product directly to a customer on the premises is not allowed (telephone, computer or mail order is acceptable).
- g. No internal or external alterations or construction features not customarily found in a dwelling shall be permitted.
- h. Mechanical equipment, dangerous or toxic materials not normally found in the home will not be permitted.
- i. The home occupation shall not produce offensive odors which are detectable to the neighborhood.
- j. There shall be no interior window displays or exterior advertising on the residential property.
- k. Advertising messages shall be limited to the name of the home occupation, phone number or post office box number and be limited to printed or published media.
- l. Such occupations shall not generate vehicular traffic not normally associated with residential use.
- m. Only one identified vehicle associated with the home occupation shall be permitted at the residence.
- n. There shall be no storage of equipment unless said equipment is contained within an enclosed structure.

IF PERMIT IS GRANTED, I / WE WILL ABIDE BY ALL THE RULES AND REGULATIONS OF THE ATWATER MUNICIPAL CODE. I ALSO ATTEST THAT I HAVE READ SECTION 17.75.040 OF THE ATWATER MUNICIPAL CODE PRINTED ABOVE AND I BELIEVE THAT MY PROPOSED USE CONFORMS TO THIS SECTION. I HEREBY CONSENT TO SAID USE IF APPROVED.

Print Name and Title: _____

Signature: _____

Email Address: _____

Contact Phone No.: _____

FOR CITY USE ONLY

COMMENTS / CONDITIONS: _____

STAFF SIGNATURE: _____

DATE: _____