



BUSINESS LICENSE APPLICATION

City of Oceanside
Financial Services Department

PLEASE INDICATE:

- New Business
- Additional Information
- Change of Owners
- Change of Business Address
- Change of Business Name
- Add/Change Business Description
- Home Occupation
- No Longer in Business

Please mail completed applications to:
300 N Coast Hwy, Oceanside CA 92054
Make checks payable to City of Oceanside
INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

BUSINESS INFORMATION

MAILING ADDRESS:

BUSINESS LOCATION:

Business Name: _____

Business Address: _____

In care of: _____

(NO PO BOX)

NUMBER

STREET

SUITE NO.

Mail Address: _____

Bus. Phone: _____

NUMBER

STREET

SUITE NO.

CITY

STATE

ZIP

City Start Date _____

Corp. Name: _____ Phone#: _____

CITY

STATE

ZIP

State ID _____

Health Permit _____

 Sole Prop

Hrs. of Operation _____

Fed ID _____

ABC License # _____

 Partnership

Of Employees _____

Seller's Permit _____

Contractor #/Class _____

 Corporation LLC

Property Owner/Management Co: _____

Address of Owner/Management Co: _____

Phone Number of Owner/Management Co: _____

Business activity must be described in detail: _____

SIZE OF FACILITY (sq. ft.) _____

OWNERSHIP INFORMATION

Owner/Pres: _____

Owner/Pres: _____

Home Address: _____

Home Address: _____

NUMBER

STREET

SUITE NO.

NUMBER

STREET

SUITE NO.

CITY

STATE

ZIP

CITY

STATE

ZIP

Email: _____

Email: _____

Home/Cell Phone: (____) _____

Home/Cell Phone: (____) _____

SSN: _____ Birth Date: _____

SSN: _____ Birth Date: _____

DL# _____ Issuing State _____

DL# _____ Issuing State _____

(Contractors Only) Bid Amount: _____ **Fees:** _____

DECLARATIONS

I certify that in the performance of any business activities for which this license is issued, I shall not employ a person in any manner so to become subject to the Worker's Compensation laws of California. If I should become subject to the Worker's Compensation laws I shall forthwith comply with the provision of section 3700 of the labor code. I further declare under penalty of perjury under the laws of California that the above information is true and correct to the best of my knowledge.

TITLE

PRINT NAME

SIGNATURE

DATE

License No. **BL-**

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On October 11, 2017, Governor Brown signed AB-1379. This bill raised the SB-1186 fee to \$4.00 for six years, effective January 1, 2018. The fee returns to \$1.00 after the six-year period.

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.

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
- The Department of Rehabilitation at www.rehab.cahwnet.gov
- The California Commission on Disability Access at www.cdda.ca.gov