



IN CITY BUSINESS LICENSE APPLICATION PACKET

Anyone doing business in the City of La Mesa must have a business license. You will need your business address, type of business, and a completed application. An application can be obtained by visiting the City of La Mesa's Finance Department's webpage at www.cityoflamesa.com or in person at City Hall. We accept check, cash, money order or Visa/MasterCard/Discover credit cards during regular business hours.

Please read this packet and complete the included forms. If you should have any questions about this paperwork, call the Business License Officer at 619.667.1118. All in-city business license applications will be sent for review to city departments and processing times can take approximately 2-3 weeks for department approvals.

SUGGESTED-Create a Business Plan-Research how to create a business plan at your local library. Additional resources are available at The Small Business Administration (619.557.7250) and/or SCORE Business Counseling (619.557.7272). *Determine the Legal Structure of Your Business*-You can contact your own accountant or attorney for assistance in this matter. For additional information, contact the office of California's Secretary of State at 916.657.5448.

MANDATORY-Fictitious Business Name-Obtain information on how to establish a fictitious business name from the San Diego County Clerk's office by calling 619.401.5700.

MANDATORY-Location-Select a site, determine zoning requirements and secure any special permits. Determine city zoning requirements prior to signing a lease or contract by contacting the City of La Mesa's Planning Division at 619.667.1177. The Planning Division can check specific site zoning or what zones would be appropriate for your business. They will also assist in determining which discretionary permits are required for specific business types.

MANDATORY-Sellers Permit-Obtain a seller's permit and resale certificate if you will be selling taxable items or will provide a taxable service. For the appropriate forms, please visit the California State Board of Equalization website at www.boe.ca.gov or at 858.385.4700.

MANDATORY-Tax Numbers-Obtain employer ID numbers, if you intend on employing staff. These numbers are not necessary until employees are hired and can be obtained by completing form SS-4 from the Internal Revenue Service, call 800.829.3676. Businesses are also required to obtain a state identification number to report employee taxes to the State. For more information contact the Employment Development Department at 619.516.1920. Contact the Internal Revenue Service to receive the Tax Guide for Small Business which is an invaluable tool to help business owners understand the basics. Call the IRS at 800.829.1040.

BUSINESS LICENSE DIVISION

The Business License Division of the City of La Mesa addresses business tax and sales tax issues; it does not regulate business activities. Per the La Mesa Municipal Code section 6.04, anyone doing business in the City of La Mesa must have a business license issued by the City of La Mesa. "Doing business in the City" is defined as having an office or work site within the geographic boundaries of the City, or entering the City to conduct business with the intent of being paid, including: all businesses with La Mesa addresses, all professionals, home-based businesses, contractors, subcontractors and delivery businesses based in other cities. Almost every city and county in California has some form of business licensing or business tax certificate program. Because it is a local tax, licensing is not transferable between cities or counties.

NOTICE: 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.ccca.ca.gov.



8130 Allison Avenue • La Mesa, CA 91942
Attn: Business License Section • (619) 667-1118

- Please Check One →
- NEW APPLICATION
 - CHANGE OF OWNER
 - CHANGE OF ADDRESS
 - CHANGE OF BUSINESS NAME
 - HOME OCCUPATION
 - OUT OF CITY

BUSINESS LICENSE APPLICATION

Business Name _____

Business Location _____
(Not P. O. Box)

City _____ State _____ Zip _____

Mailing Address _____
(If Different)

City _____ State _____ Zip _____

Bus. Phone () _____ Bus. Fax () _____

E-Mail Address _____

Enter number of Employees (In-City Businesses Only)	Enter number of Units (Apts. Only)
[]	[]

Will any construction modification be made to the premises? YES NO

- FIREARMS SALES:**
- New Firearms
 - New/Used Firearms (Secondhand Dealer)
 - Used Firearms (Secondhand Dealer)

Start Date	Description of Business (please be specific)

Ownership: Corporation Ltd. Liability Corp. Partnership Sole Proprietor Trust

State Lic. No. _____ License Type _____ Expiration Date _____

Seller's Permit _____ Federal ID No. (EIN) _____ State ID No. (EDD) _____

ENTER BELOW NAMES OF OWNERS, PARTNERS, OR CORPORATE OFFICERS - USE ADDITIONAL SHEETS AS NECESSARY:

Owner Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

City _____ State _____ Zip _____

Social Security No. _____ Driver's License No. _____

Owner Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

City _____ State _____ Zip _____

Social Security No. _____ Driver's License No. _____

IN CASE OF EMERGENCY, PLEASE CONTACT (IN-CITY BUSINESSES ONLY):

Name _____ Title _____ Phone () _____

Address _____ Cell Phone () _____

ALARM COMPANY, IF APPLICABLE (IN-CITY BUSINESSES ONLY):

Name _____ Title _____ Phone () _____

Address _____ License No. _____

I declare, under penalty of perjury, that the above application is true and correct to the best of my knowledge. I certify that I will operate my business in accordance with all applicable federal, state and city laws and regulations. I further understand that any false statements made above are grounds for denial or revocation of the business license.

Date: _____ Signature of Owner or Representative: _____

RETURN ENTIRE APPLICATION FORM TO ABOVE ADDRESS AND MAKE CHECK PAYABLE TO THE CITY OF LA MESA

NOTICE: 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.

Thank you for doing business in the City of La Mesa!

LICENSE REVIEWED & APPROVED BY:

• OFFICIAL USE ONLY •

Police Dept. _____ / _____

Building Dept. _____ / _____

Fire Dept. _____ / _____

Planning Dept. _____ / _____

COMMENTS: _____

Total Amt. Paid \$ _____
Date Paid _____ CASH CHECK
Receipt # _____ CREDIT CARD

Base Fee	\$	
Employee Fee	\$	
Other	\$	
Other	\$	
State CASp Fee	\$	4.00
TOTAL AMOUNT DUE	\$	



CITY OF LA MESA

8130 Allison Avenue, La Mesa, California 91941
Attn: Business License Section • 619.667.1118

SOLICITOR OR PEDDLER APPLICATION

Applicant's Name _____
Local Residence _____
Applicant's Business Name _____
Business Address _____
Bus. Phone () _____ Home Phone () _____
Fax No. () _____ E-Mail Address _____ Start Date _____

Applicant's Description

Height _____ Weight _____ Sex _____ Color of Hair _____ Color of Eyes _____
Birthplace _____ Birthdate _____

If Applicant is an employee (Please complete the following information)

Employer's Name _____ Birthdate _____
Address _____ Zip Code _____
Type of Business _____
Description of Products or Service offered: _____
Permit is desired for what length of time? _____

Place Where Product is Manufactured

Name _____
Address _____
City _____ State _____ Zip Code _____

Place Where Products Are Located At Time Of Filing This Application

Name _____
Address _____
City _____ State _____ Zip Code _____
Proposed Method of Delivery: _____

Have you ever been convicted of any crime, misdemeanor, or violation of any Municipal Ordinance? *(If none, please indicate)*

Nature Of Offense _____
Date Of Offense _____ Punishment or Penalty assessed _____

I, _____ hereby certify the statements contained in this application are to the best of my knowledge true.

Signature

Subscribed and Sworn to before me, the undersigned Notary Public, this _____ Day of _____, 19 _____

Notary Public in and for the County of San Diego, State of California

POLICE DEPARTMENT USE ONLY

Application Approved Denied

Application Approved Subject to the Following conditions: _____

Reason for Denial: _____

Chief of Police _____

By _____

FINANCE DEPARTMENT USE ONLY

Class of License Issued _____ License # _____

Amount of License Fee: \$ _____ Date Issued _____ Receipt # _____

Description Of Vehicle Used By Solicitor or Peddler

Year _____ Make _____ Model _____ Color _____

License Tag # _____ State Where Issued _____

Driver's License # _____ Expiration Date _____

Company Business License # _____

Director of Finance _____

By _____

PERMIT PRICING/REQUIREMENTS

FEE: \$35.00/\$70.00 out-of-city **As of January 1, 2018, a \$4.00 State CASp Service Fee is applied to
\$15.00 Permit Fee all new and renewal business licenses**
\$110.00 Investigation Fee.

Must fill out business license and solicitor applications
Provide proof of \$1,000 surety bond naming the City,
Three photographs taken within the last 60 days,
Set of fingerprints.

EXEMPTIONS: Non-profit, disabled and minors
Still need to fill out paperwork