



CITY OF VACAVILLE

650 Merchant Street • P. O. Box 6178 • Vacaville, CA 95696-6178
Phone (707) 449-5185 x 2 • www.cityofvacaville.com
business.licenseemail@cityofvacaville.com

BUSINESS LICENSE APPLICATION

Finance Use Only

BL Number: _____

Received By: _____ Date: _____

Entered By: _____ Date: _____

Please Select Your Contact Preference

<input type="checkbox"/>	Paper Notifications	<input type="checkbox"/>	Email Notifications 
--------------------------	------------------------	--------------------------	--

Business Name: _____

Description of Business: _____

Business Location: _____ City: _____ St: _____ Zip: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____
(If different than above)

Business Phone #: _____ Ext. _____ Email: _____

Ownership	
<input type="checkbox"/>	Sole Proprietorship
<input type="checkbox"/>	Corporation
<input type="checkbox"/>	Partnership
<input type="checkbox"/>	Limited Liability Corp.
<input type="checkbox"/>	Non-Profit

State License (If applicable)	
CSLB #:	_____
Exp Date:	_____ Type: _____
CAMTC #:	_____
Exp Date:	_____ Type: _____

Identification	
Federal ID No.	_____
State ID No.	_____
Resale No.	_____

Enter the Names of Owners, Partners, or Corporate Officers Below

Per AB 2184, you may protect your residential address by providing a different Service of Process address in accordance with Sections 16000.1(a)(2) and 16100.1(a)(2) of the Business and Professions Code. To do so, please fill out the portion at the bottom of this section.

1st Owner/Officer Name _____ Title _____

Date of Birth: _____

Address _____

Driver's Lic #: _____

Phone No. _____ Ext. _____

SSN/ITIN: _____

2nd Owner/Officer Name (Optional) _____ Title _____

Date of Birth: _____

Address _____

Driver's Lic #: _____

Phone No. _____ Ext. _____

SSN/ITIN: _____

Emergency Contact Name (Optional) _____ Title _____

Address _____

Phone No. _____ Ext. _____

SERVICE OF PROCESS ADDRESS, PURSUANT TO AB 2184 - AVAILABLE FOR PUBLIC INSPECTION

If you wish to protect your residential address with a different service of process address, please provide it here.
NOTE - if your service of process address is a post office box or private mailbox, it must comply with paragraph (2) of subdivision (b) of Section 17538.5 of the California Business and Professions Code.

Service of Process Address _____

Residential Address to Protect: Business Location Mailing Address Owner/Officer Address

ADDITIONAL INFORMATION

Will firearms be sold?

YES

NO

Is this business located downtown?

(Additional Fees Apply)

YES

NO

Is your business a non-profit?

(If yes, attach copy of documentation)

YES

NO

Is this a home based business within Vacaville city limits?

(If yes, you must complete all Home Occupation Permit questions below)

YES

NO

FEE CLASSIFICATION

Number of
Owners/Employees
(fulltime equivalent) # _____

Number of
Apt Units/Theatre Seats
(if applicable) # _____

Are you a business that is a regulated industry with storm water discharge requirements in accordance with the SB205 NPDES permit program?

Yes

NO

If yes, please provide the SIC # and Permit # below. <https://www.osha.gov/pls/imis/sicsearch.html>

SIC# _____

NPDES WDID Permit # _____

HOME OCCUPATION PERMIT QUESTIONS * (Required for Vacaville Home Based Business) *****

Days/Times of Operation: S M T W T F S Times _____

Annual Gross Receipts: <\$1,000 \$1,000-\$2,500 >\$2,500
verification required to renew if under \$2,500

Make/Model of each Vehicle & License Plate #: _____

Will you be using a Trailer? Yes No **If yes, License plate #:** _____

What part of the dwelling will be used for the business?: _____

List any equipment/tools used: _____

Describe materials/supplies used and amounts: _____

Where will materials/supplies be stored? Indoor Outdoor Both

Describe business related storage: _____

****Under deferral and state law, compliance with disability access law is 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.doc.ca.gov/dsa The Department of Rehabilitation at www.dor.ca.gov The California Commission on Disability Access at www.cdda.ca.gov**

I hereby certify, under penalty of perjury, that the information in this application and any attachments hereto is true, correct and complete to the best of my knowledge, and that I will comply with the provision of the Vacaville Municipal Code and all federal, state and local laws and regulations governing the operation of this business. I certify that if this is a home based business and I am a renter that my landlord is aware of this business. I have read the Home Occupation standards as described in the Vacaville Municipal Code, Chapter 14.09.270.120

Signature of Owner or Representative

Title

Date

Thank you for doing business in the City of Vacaville!

City of Vacaville
BUSINESS LICENSE FEE SCHEDULE
Fees Paid Annually

The fee is based on the type of business listed below. If you are not sure of your business category, please contact our office at (707) 449-5129

- SERVICE** - handyman, janitorial service, beauty/personal service, etc.
CONTRACTOR - carpenter, roofer, solar installer, etc.
RETAIL, WHOLESALE, & MANUFACTURING - grocery store, online sales, etc.
PROFESSIONAL - consultant, realtor, accountant, physician, etc.

Locate your Business License Annual fee below. Our fee's are determined by the number of full time employees, including the owner.
 Fees are prorated according to the date of application. Please contact our office if the number of employees exceeds 100.

Service/Contractor/Retail-Wholesale												
# of Employees	March	April	May	June	July	August	Sept.	Oct.	Nov.	Dec.	January	February
1	\$ 65.00	\$ 65.00	\$ 65.00	\$ 59.58	\$ 54.17	\$ 48.75	\$ 43.33	\$ 37.92	\$ 32.50	\$ 27.08	\$ 21.67	\$ 16.25
2-5	\$135.00	\$135.00	\$135.00	\$123.75	\$112.50	\$101.25	\$ 90.00	\$ 78.75	\$ 67.50	\$ 56.25	\$ 45.00	\$ 33.75
6-12	\$190.00	\$190.00	\$190.00	\$174.17	\$158.33	\$142.50	\$126.67	\$110.83	\$ 95.00	\$ 79.17	\$ 63.33	\$ 47.50
13-25	\$270.00	\$270.00	\$270.00	\$247.50	\$225.00	\$202.50	\$180.00	\$157.50	\$135.00	\$112.50	\$ 90.00	\$ 67.50
26-50	\$355.00	\$355.00	\$355.00	\$325.42	\$295.83	\$266.25	\$236.67	\$207.08	\$177.00	\$147.92	\$118.33	\$ 88.75
51-100	\$575.00	\$575.00	\$575.00	\$527.08	\$479.17	\$431.25	\$383.33	\$335.42	\$287.50	\$239.58	\$191.67	\$143.75

Professional												
# of Employees	March	April	May	June	July	August	Sept.	Oct.	Nov.	Dec.	January	February
1	\$ 90.00	\$ 90.00	\$ 90.00	\$ 82.50	\$ 75.00	\$ 67.50	\$ 60.00	\$ 52.50	\$ 45.00	\$ 37.50	\$ 30.00	\$ 22.50
2-5	\$160.00	\$160.00	\$160.00	\$146.67	\$133.33	\$120.00	\$ 106.67	\$ 93.33	\$ 80.00	\$ 66.67	\$ 53.33	\$ 40.00
6-12	\$215.00	\$215.00	\$215.00	\$197.08	\$179.17	\$161.25	\$143.33	\$125.42	\$ 107.50	\$ 89.58	\$ 71.67	\$ 53.75
13-25	\$320.00	\$320.00	\$320.00	\$293.33	\$266.67	\$240.00	\$213.33	\$186.67	\$160.00	\$133.33	\$ 106.67	\$ 80.00
26-50	\$405.00	\$405.00	\$405.00	\$271.25	\$337.50	\$303.75	\$270.00	\$236.25	\$202.50	\$168.75	\$135.00	\$ 101.25
51-100	\$625.00	\$625.00	\$625.00	\$572.92	\$520.83	\$468.75	\$416.67	\$364.58	\$312.50	\$260.42	\$208.33	\$156.25

CALIFORNIA AB 1379 FEE of \$4.00 in addition to the City of Vacaville Business License Fee is required for all new business applications and renewals.

HOME OCCUPATION PERMIT FEE is a one time fee as long as you stay at the business address listed on the application. = **\$130.00**

VENDING COMPANIES will pay a base fee of \$15.00 for the initial Business License Fee. Renewal of the Business License will require a fee of \$15.00, plus an amount equal to \$1.15 for each \$1,000 of gross sales in the previous 12-month period.

All Business Licenses expire April 30th and renewal notices go out March 1st of each year. New application year starts March 1st.

Vacaville Downtown Improvement District			
BID Areas			
For questions please contact DVBD at (707) 451-2100 or info@DowntownVacaville.com			
"DOWNTOWN" businesses are subject to an additional Downtown Business Improvement District Fee.			
Zone A		Zone B	
Catherine	500-699	Boyd	400-801
Davis	200-699 Odd	Bush	100-199
Dobbins	200-299	Catherine	700-799
Kendal	100-498 Even	Cernon	100-499
Main	200-699	Davis	200-698 Even
Mason	500-699	Depot	100-298 Even
Mason	700-898 Even	Dobbins	100-199
Merchant	300-399	Elizabeth	300-699
Parker	200-399	Hickory	100-699
Town Square	001-099	Kendal	100-499 Odd
Wilson	300-498 Even	Main	700-799
		Mason	300-499
		Mason	701-899 Odd
		McClellan	100-399
		McKnight	400-599
		Merchant	400-500
		E Monte Vista	100-401
		E Monte Vista	800-899
		E Monte Vista	500-798 Even
		Olive	400-599
		Parker	100-199
		Pecan	400-599
		School	700-799
		Stevenson	200-599
		William	400-699
		Wilson	300-499 Odd
Retail / Restaurant	\$ 250.00	Retail / Restaurant	\$ 200.00
Hotels - (per room)	\$ 10.00	Personal Service	\$ 25.00
Movie Theaters (per 3 seats)	\$ 1.00	Service	\$ 135.00
Personal Service	\$ 30.00	Professional	\$ 85.00
Service	\$ 200.00	Banks	\$ 400.00
Professional	\$ 150.00	Plus per full time employee	\$2.00
Banks	\$ 500.00		
Plus per full time employee	\$ 3.00		
		DVBID Phone	(707) 451-2100
		DVBID Fax	(707) 451-2829