



CITY OF BLUE LAKE

P.O. Box 458, 111 Greenwood Road, Blue Lake, CA 95525
Phone 707.668.5655 Fax 707.668.5916

APPLICATION FOR BUSINESS LICENSE

GENERAL INFORMATION: Do you have: a Business?: _____ Rentals?: _____

Your/Contact Name: _____

Mailing Address: _____

Phone number: _____ Emergency phone number: _____

Email: _____ Web Address: _____

For Landlords with Rentals: (If necessary, please list on back of form)

Name of Business (if any): _____

Number of rental units: _____ Please list addresses: _____

For Businesses (other than Landlords with Rentals):

Name of Business: _____

Business Physical Location: _____

Business Description: _____

If your business is located outside the city limits the fee for # of employees does not apply to your business.

If your business is located inside the city limits: Number of employees: _____

Alarm: yes ___ no ___ Is your business located inside your home? Yes ___ No ___

Based on Resolution 1148, please calculate the amount due: \$ _____

Sign and Date below, return this form with payment due to Blue Lake City Hall.

CERTIFICATION:

Please note that the issuance of a business license does not in any manner excuse compliance with any applicable state, county or municipal laws or regulations. The purpose of the business license fee is solely to raise money for municipal purposes and is not intended for regulation.

I certify under penalty of perjury that the above information is true and correct.

Signed: _____ **Date:** _____ **Title:** _____

-----Office Use Only-----

Paid: \$ _____ Date Paid: _____ Check No: _____ Cash: ___ CC: ___ Initial: _____