



# CITY OF BLUE LAKE

Please Complete and Return to City Hall  
111 Greenwood Road, Blue Lake, CA 95525  
Phone 707.668.5655 Fax 707.668.5916

## APPLICATION BUSINESS LICENSE: QUARTERLY OR DAILY ONLY

### GENERAL INFORMATION:

Business Owner: \_\_\_\_\_

Your/Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Emergency phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Physical Location: \_\_\_\_\_

Business Description: \_\_\_\_\_

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

If your business is located inside Blue Lake City Limits:

Number of employees: \_\_\_\_\_

Is your business located inside your home? Yes \_\_\_\_\_ No \_\_\_\_\_

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

### 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.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

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

Paid: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check No: \_\_\_\_\_ Cash: \_\_\_\_\_ CC: \_\_\_\_\_ Initial: \_\_\_\_\_

Business Lic. Number: \_\_\_\_\_ Quarterly or Daily: \_\_\_\_\_

Effective Date(s): \_\_\_\_\_