

City of Greenfield

City Hall: P.O. Box 127/45 El Camino Real/Greenfield, California 93927
(831)674-5591 FAX (831)674-3149
CORPORATION YARD (831)674-2635 FAX (831) 674-3259

BUSINESS LICENSE APPLICATION

NAME OF BUSINESS _____

OWNER _____

MAILING/BILLING ADDRESS _____

SITE ADDRESS (only in city) _____

PHONE # () _____ CELL# () _____

BUSINESS FAX# _____

EMAIL ADDRESS _____

BUSINESS ACTIVITY _____

STATE LICENSE # (if applicable) _____

EMPLOYER I.D/TAX I.D/SOCIAL SECURITY # _____

DATE

APPLICANT SIGNATURE

ACCORD FORM 25, CERTIFICATE OF WORKMAN'S COMPENSATION INSURANCE IS REQUIRED, AS APPLICABLE.

COPY OF HEALTH PERMIT TO BE INCLUDED, AS APPLICABLE.

CITY BUSINESS LICENSE APPLICATION/FEE ARE REQUIRED BY GREENFIELD MUNICIPAL CODE SECTION 5.04.040

*****DO NOT WRITE BELOW THIS LINE*****

SITE APPROVAL _____
DATE

POLICE CHIEF

DATE

COMMUNITY DEVELOPMENT DIRECTOR

INITIAL LIC # _____ ISSUED _____ EXPIRES _____ HEALTH PERMIT _____ SOLICITOR LIC _____

*****NOTICE*****

ALL BUSINESS SIGNS, WEATHER PAINTED OR ATTACHED TO A WALL, REQUIRE ARCHITECTURAL REVIEW FROM THE CITIES COMMUNITY DEVELOPMENT DEPARTMENT.

ALL SIGN PERMIT APPLICATIONS MUST INCLUDE A DRAWING SHOWING SIGN SIZE, LETTERING, COLOR, PROPOSED MATERIALS THAT WILL BE USED TO ATTACH OR SUPPORT THE SIGN.

SALES OR USERS TAX MAY APPLY TO YOUR BUSINESS ACTIVITIES. YOU MAY SEEK WRITTEN ADVICE REGARDING THE APPLICATION OF TAX TO YOUR PARTICULAR BUSINESS BY WRITING TO THE NEAREST STATE BOARD OF EQUALIZATION OFFICE.

ALONG WITH BUSINESS LICENSE INFORMATION, ALL APPLICATIONS MUST COMPLETE THE ATTACHED "**HAZARDOUS MATERIAL QUESTIONNAIRE**". BASED ON OCCUPANCY TYPE, THE QUESTIONNAIRE MAY BE CIRCULATED TO THE MONTEREY COUNTY HEALTH DEPARTMENT AND THE MONTEREY BAY UNIFIED AIR POLLUTION CONTROL DISTRICT FOR THEIR REVIEW.

IF THE QUESTIONNAIRE IS NOT RETURNED WITH THE LICENSE APPLICATION YOUR APPLICATION WILL NOT BE PROCESSED.

WORKERS' COMPENSATION DECLARATION

I HERBY AFFIRM UNDER PENALTY OF PEJURY ONE OF THE FOLLOWING DECLARATIONS:

I HAVE AND WILL MAINTAIN A CERTIFICATE OF CONSENT TO SELF-INSURE FOR WORKERS' COMPENSATION, AS PROVIDED BY SECTION 3700, FOR THE DURATION OF ANY BUSINESS ACTIVITIES CONDUCTED FOR WHICH THIS LICENSE IS ISSUED.

I HAVE AND WILL MAINTAIN WORKERS' COMPENSATION INSURANCE, AS REQUIRED BY SECTION 3700, FOR THE DURATION OF ANY BUSINESS ACTIVITIES CONDUCTED FOR WHICH THIS LICENSE IS ISSUED.

MY WORKERS' COMPENSATION INSURANCE INFORMATION IS:

CARRIER _____

POLICY NUMBER _____

I CERTIFY THAT IN THE PERFORMANCE OF ANY BUSINESS ACTIVITIES FOR WHICH THIS LICENSE IS ISSUED I SHALL NOT EMPLOY ANY PERSON IN ANY MANNER SO AS TO BECOME SUBJECT TO WORKERS' COMPENSATION LAWS OF CALIFORNIA, AND AGREE THAT IF I SHOULD BECOME SUBJECT TO THE WORKERS' COMPENSATION PROVISIONS OF SECTION 3700 OF THE LABOR CODE. I SHALL FORTHWITH COMPLY WITH THE PROVISIONS OF SECTION 3700.

NAME _____ DATE _____

ADDRESS _____ SIGNATURE _____

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO \$100,000, IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR THE SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

Monterey County Health Department
1270 Natividad Road, Room B301
Salinas, CA 93906
(831) 755-4511
Fax (831) 755-8954

Jurisdiction Name _____
Use Permit # _____
Or _____
Building Permit # _____
Contact Name _____
Phone # _____

HAZARDOUS MATERIAL QUESTIONNAIRE

Business Name _____ Type of Business _____
Site Location _____ City _____ APN: _____
Mailing Address _____
Business Contact _____
Property Owner _____
Name Phone Number
_____ *Name Phone Number*

1. Will your business/proposed project be using any hazardous materials such as oil, fuels, solvents, compressed gases, acids, corrosives, pesticides, fertilizers, paints or other chemicals?
 Yes No
2. Will your business/proposed project be using hazardous materials in quantities of 55 gallons and above for liquids, 500 lbs. and above for solids and/or 200 cubic feet and above for compressed gases?
 Yes No
3. Will your business/proposed project be using any quantities of acutely hazardous materials such as ammonia, chlorine, sulfuric acid, formaldehyde, hydrogen peroxide, methyl bromide or other restricted pesticides?
 Yes No
4. Will your business/proposed project be using underground storage tanks to store hazardous materials?
 Yes No
5. Will your business/proposed project be generating any quantities of hazardous waste such as waste oil, waste solvents, etc?
 Yes No
6. Will your business/proposed project be emitting any hazardous air emissions?
 Yes No

CERTIFICATION:

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct to the best of my knowledge and belief.

ANY QUESTIONS REGARDING THIS FORM CAN BE DIRECTED TO:

Monterey County Health Department
Division of Environmental Health
1270 Natividad Road, Room B301
Salinas, CA 93906
(831) 755-4511

Executed AT:

City, State

Print Name of Owner/Operator: _____

Signature of Owner/Operator: _____

For Local Jurisdiction Use Only:

1. Is there a known or proposed school, hospital, day care, or long term care facility within 1,000 feet of this site location?
 Yes No
2. Is there a known or proposed school, hospital, day care, or long term care facility ¼ mile of this site location?
 Yes No

Health Department Clearance

Signature: _____ Date: _____

Print Name and Title: _____

Air Pollution District Clearance

Signature: _____ Date: _____

Print Name and Title: _____

**CITY OF GREENFIELD
ZONING CLEARANCE AND OCCUPANCY PERMIT
APPLICATION**

NOTE: THIS APPLICATION FORM IS FOR ZONING CLEARANCE ONLY, AND DOES NOT AUTHORIZE CONSTRUCTION OR PHYSICAL OCCUPATION OF A STRUCTURE, WHICH DOES NOT COMPLY WITH THE APPROPRIATE BUILDING CODES. IT AUTHORIZES THE ESTABLISHMENT OF A NEW USE FOR WHICH NO CONDITIONAL USE PERMIT IS REQUIRED OR THE SUBSTITUTION OF AN EXISTING CONDITIONAL USE PERMIT WITH ANOTHER, WHICH IS CONSISTENT WITH THE APPROVED USE PERMIT FOR THE SITE.

1. GENERAL INFORMATION

ADDRESS OF THE BUSINESS _____ PHONE _____
NAME OF BUSINESS _____
APPLICANT'S NAME _____ PHONE _____
APPLICANT'S ADDRESS _____
DESCRIPTION OF BUSINESS _____
DATE OF OCCUPANCY _____ PREVIOUS USE _____
NUMBER OF EMPLOYEES _____ BUSINESS HOURS _____ DAYS _____

2. LOCATION INFORMATION

BUSINESS AREA 1ST FLOOR _____ SQ/FT 2ND FLOOR _____ SQ/FT
OUTSIDE AREA FOR STORAGE AND SEATING _____ SQ/FT TOTAL _____ SQ/FT
CHECK ONE _____ SINGLE TENANT BUILDING _____ MULTI-TENANT BUILDING
NUMBER OF PARKING SPACES (TOTAL) _____ FOR YOUR BUSINESS _____

(DO NOT INCLUDE PARKING IN STREET)

CHECK ONE _____ EXISTING SIGN TO BE REFACED _____ NEW SIGN
PROPOSED _____ NO SIGN

(ALL SIGNS MUST BE CONSISTANT WITH THE CITY OF GREENFIELD SIGN ORDINANCE AND REQUIRES ARCHITECTURAL REVIEW AND MAY REQUIRE A BUILDING PERMIT)

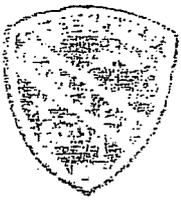
3. DECLARATION

I DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION, WHICH I HAVE SET FORTH IN THIS APPLICATION, IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND THAT I AGREE TO OPERATE THE ABOVE DESCRIBED BUSINESS IN STRICT COMPLIANCE WITH THE CITY ZONING REGULATIONS GOVERNING THAT BUSINESS.

SIGNATURE _____ DATE _____

4. FOR OFFICE USE ONLY

AUTHORIZING ORDINANCE SECTION _____
DATE APPROVED _____
DATE DENIED _____
REASON FOR DENIAL _____
COMMENTS/STIPULATIONS _____



GREENFIELD POLICE DEPARTMENT BUSINESS EMERGENCY CONTACT

Business Name: _____ **Bus. Tel:** _____

Business Address: _____

Business Owner: _____

Address: _____

Home Tel: _____

Cellular: _____

Fax: _____

Emergency Contacts Other Than Owner:

Name: _____ **Telephone:** _____

Address: _____ **Cellular:** _____

Name: _____ **Telephone:** _____

Address: _____ **Cellular:** _____

Property/Building Owner:

Name: _____

Address: _____

Home Tel: _____

Cellular: _____

Fax: _____

**Please mail or return to Greenfield Police Department 215 El Camino Real,
Greenfield, CA 93927 or Fax to (831) 674-3747**



License & Permit Information-Monterey County

Business License	<p><u>Monterey:</u></p> <ul style="list-style-type: none"> City of Monterey, City Hall Revenue, Room 4, Monterey, CA 93940 (Corner of Pacific & Madison Street); (831) 646-3944 <p><u>Carmel by the Sea:</u></p> <ul style="list-style-type: none"> City Hall, East Side of Monteverde between Ocean Ave & 7th; (831) 620-2010 <p><u>Marina:</u></p> <ul style="list-style-type: none"> 211 Hill Crest Avenue, Marina, CA, 93933; (831) 884-1278 <p><u>Seaside:</u></p> <ul style="list-style-type: none"> 440 Harcourt Avenue, Seaside, 93955; (831) 899-6240 <p><u>Salinas:</u></p> <ul style="list-style-type: none"> 200 Lincoln Avenue, Salinas, CA, 9390; (831) 758-7212 <p><u>Other areas:</u> Del Rey Oaks: 394-8511; Gonzales: 675-5000; Greenfield: 674-5591, King City: 385-3281; Pacific Grove: 648-3100;</p> <p>Sand City: 394-3054; Soledad: 678-3963</p>	<p><i>Frequently Asked Questions</i></p> <p>Where do I get a Business License for my company?</p> <p>You can obtain a business license where your business is located. Typically, the City Clerk, Business Office, or Finance Department will issue the licenses for the city. If you are a home-based business in the unincorporated area of Monterey County, you may also be required to obtain a Home Occupational Permit in addition to a business license.</p>
California License & Permit Information	<p>CalGOLD http://www.calgold.ca.gov</p>	<p>What is a Fictitious Business Name Statement?</p>
Environmental Health Services	<p>County Health Care Services Agency Monterey: 647-7654; Salinas: 755-4505; King City: 755-4579</p>	<p>A fictitious business name statement is filed with the County Clerk in the county where your business is located. If the business name is available your filing will grant you the exclusive right to use the name in that county. The filing identifies you to potential creditors as the owner of the business you are starting, buying, or renaming.</p>
Employment Developmental Department	<p>730 La Guardia St, Salinas, CA 93905; 649-2925</p>	<p>Once you have filed, you will be required to advertise your filing in the newspaper for four weeks. Upon completion of the advertising, you will be granted the business name.</p>
Employer Identification Number	<p>State: California Employment Development Department</p> <ul style="list-style-type: none"> (888) 745-3886 http://www.caljobs.ca.gov <p>Federal: Internal Revenue Service</p> <ul style="list-style-type: none"> (800) 829-1040 http://www.irs.gov 	<p>What is a Business Plan and why do I need one?</p>
Fictitious Business Name	<p>County Clerk's Office 240 Church Street, 3rd Floor, Room 305, P.O. Box 1819 Salinas, CA 93902 (831) 755-5450 Form and Instructions http://www.co.monterey.ca.us</p>	<p>A business plan is considered to be the "road map" for your business operation. A well-written business plan will set forth the goals for your business and guide your current and future operations. Every plan should include information on the history and development of your business, the product or service you offer, your marketing strategy, the ownership structure, personnel requirements, and the financial plan of the business. For the startup business, a business plan acts as a "feasibility study" to determine whether the potential business is viable.</p>
Federal Withholding Taxes	<p>Internal Revenue Service (800) 226-9947 http://www.irs.gov</p>	<p>A completed business plan can also be used as a tool to gain financing for the business, or to recruit employees. However, the greatest benefit of the plan is that you, the business owner, will have a clear understanding of your business, industry, and marketplace. This knowledge will lead to better decision-making, and ultimately, increased profitability.</p>
Incorporation/ LLC/ Limited Partnerships	<p>Secretary of State 1500 11th Street, Sacramento, CA 95814 (916) 657-5448 http://www.ss.ca.gov/business/business.htm</p>	<p>The SDDC offers monthly Business planning workshop.</p>
Seller's permit	<p>California State Board of Equalization Salinas Office: 111 E. Navajo Drive, Suite 100, Salinas, CA 93906-2452 (831) 443-3003</p>	
State Withholding Taxes	<p>1900 Garden Road, Suite 160, Monterey, CA 93940 http://www.edd.ca.gov</p>	
Zoning Requirements	<p>Planning Department Monterey: 646-3885; Carmel: 620-2010; Del Rey Oaks: 394-8511; Gonzales: 675-5000; Greenfield: 674-5591; King City: 385-3281; Marina: 884-1220; Pacific Grove: 648-3190; Salinas: 758-7206; Seaside: 899-6220; Soledad: 678-3963</p>	

For more information on starting a business or expanding an existing business, call the SBDC @ 800-464-6136 or check us at www.centralcoastsbdc.org for free of charge assistance.

Need a Seller's Permit?

Getting One Has Never Been Easier.

If you are in business, you may need a Seller's Permit from the State Board of Equalization. It's easy to apply — you can visit a Board office or apply by mail. Your choices are explained below.

You need a permit . . .

Generally, you must obtain a seller's permit if you are engaged in business in California and sell or lease merchandise, vehicles, or other tangible personal property that is subject to sales or use tax. Retailers and wholesalers are required to obtain a permit, as are persons who make temporary sales—such as sales made at swap meets and fairs, where a temporary permit is normally required.

In fact, making taxable sales without a valid permit is a misdemeanor under California's Sales and Use Tax Law and is subject to fines and penalties.

As a retailer, you must report sales or use tax based on your sales, leases, and rentals. However, if you have a valid seller's permit, you can be reimbursed by your customers for taxes due on your transactions.

You can apply . . .

1. **By Mail:** Call the Board's toll-free number, 800-400-7115, to request an *Express Registration* package. Normally, materials will be mailed to you by the second business day following your call.

2. **In Person:** Stop by your nearest Board office (see reverse). We'll ask for information about your business — estimated income and expenses, for example, and about yourself — your social security and driver's license number. If you purchased your business, we'll want to know the name and permit number of the former owner. Normally, you'll have your permit the same day.

Permits are issued free of charge. However, depending on your type of business, you may be asked for a security deposit to ensure payment of taxes.

If you have questions . . .

The best way to find out whether sales and use tax applies to your transactions is to contact the nearest Board of Equalization office (see reverse). Staff will be glad to answer your questions and requests for advice. However, for your protection, it is best to get tax advice in writing. Not only will that give us more information on which to base our advice, it may protect you from owing tax, penalty, or interest charges if we should give you erroneous advice. For this relief to apply, a request must be in writing, identify the taxpayer to whom the advice applies, and fully describe the facts and circumstances of the transaction.



State Board of Equalization

CALIFORNIA STATE BOARD OF EQUALIZATION OFFICES

BOARD MEMBERS

DISTRICT	MEMBER	OFFICE ADDRESS	AREA CODE	TELEPHONE NUMBER
First	Johan Klehs	22320 Foothill Boulevard, Suite 300, Hayward, 94541	510	247-2125
Second	Dean F. Andal	7540 Shoreline Drive, Suite D, Stockton, 95219	209	473-6579
Third	Ernest J. Dronenburg, Jr.	110 West C Street, Suite 1709, San Diego, 92101-3966	619	237-7844
Fourth	John Chiang (Acting)	15350 Sherman Way, Suite 110, Van Nuys, 91406	818	901-5733
Executive Director	E. L. Sorensen, Jr.	450 N Street, PO Box 942879, Sacramento, 94279-0001	916	445-6464

FOR GENERAL TAX INFORMATION CALL
1-800-400-7115

* For account specific information contact your local office

SACRAMENTO HEADQUARTERS 450 N Street, PO Box 942879, Sacramento 94279-0001 916 445-6464

BUSINESS TAXES FIELD OFFICES

CALIFORNIA CITIES	OFFICE ADDRESS	AREA CODE	TELEPHONE NUMBER
Bakersfield	1800 30th Street, Suite 380, PO Box 1728, 93302-1728	805	395-2880
City of Industry	12820 Crossroads Parkway, PO Box 90818, 91715-0818	562	908-5280
Concord	1001 Galaxy Way, Suite 212, 94520 (PO Box 5965, Concord, 94524)	510	687-6962
Culver City	5901 Green Valley Circle, PO Box 3652, 90231-3652	310	342-1000
El Centro	1550 W. Main Street, 92243-2832	760	352-3431
Eureka	134 D Street, Suite 301, PO Box 4884, 95502-4884 (hours 8-12 & 1-5 M-F)	707	445-6500
Fresno	5070 N. Sixth Street, Suite 110, PO Box 28580, 93729-8580	209	248-4219
Laguna Hills	23141 Moulton Parkway, Suite 100, PO Box 30890, 92654-0890	714	461-5711
Norwalk	12440 E. Imperial Highway, PO Box 409, 90651-0409	562	466-1694
Oakland	2101 Webster Street, Suite 200, No. 46, 94612-3027	510	286-0347
Rancho Mirage	42-700 Bob Hope Drive, Suite 301, 92270-4473	760	346-8096
Redding	391 Hemstead Drive, PO Box 492529, 96049-2529	916	224-4729
Riverside	3737 Main Street, Suite 1000, 92501-3395	909	680-6400
Sacramento	9823 Old Winery Place, Suite 1, 95827-1731	916	255-3350
Salinas	21 West Laurel Drive, Suite 79, 93906-3485	408	443-3008
San Diego	1350 Front Street, Rm 5047, 92101-3612	619	525-4526
San Francisco	50 Fremont Street, Suite 1400, 94105-2234	415	396-9800
San Jose	250 South Second Street, 95113-2706	408	277-1231
San Marcos	334 Via Vera Cruz, Suite 107, 92069-2637	760	744-1330
Santa Ana	28 Civic Center Plaza, Rm 239, PO Box 12040, 92712-2040	714	558-4059
Santa Rosa	50 D Street, Rm 215, PO Box 730, 95402-0730	707	576-2100
Stockton	31 East Channel Street, Rm 264, PO Box 1890, 95201-1890	209	948-7720
Suisun City	333 Sunset Avenue, Suite 330, 94585	707	428-2041
Torrance	680 W. Knox Street, PO Box T, 90508-0270	310	516-4300
Van Nuys	15350 Sherman Way, Suite 250, 91406 (PO Box 7735, Van Nuys, 91409-7735)	818	904-2300
Ventura	4820 McGrath Street, Suite 260, Ventura, 93003-7778	805	677-2700

OUT-OF-STATE FIELD OFFICES

Sacramento	450 N Street, PO Box 188268, 95818-0268	916	322-2010
Chicago, Illinois	120 N. La Salle, Suite 1602, 60602	312	201-5300
New York, N.Y.	675 Third Avenue, Rm 520, 10017-4015	212	697-4680
Houston, Texas	1155 Dairy Ashford, Suite 550, 77079-3021	713	531-3450

TDD INFORMATION

California Relay Telephone Service for the Deaf and Hearing Impaired - From TDD telephones dial 1-800-735-2929. From voice operated telephones 1-800-735-2922.