



CITY OF ESCONDIDO

201 North Broadway • Escondido, CA 92025-2798
Attn: Business License Division • 760-839-4659

BUSINESS LICENSE APPLICATION

Business Name _____ Business Location (not P.O. Box) _____ _____ Bus. Phone (____) _____ Bus. Fax (____) _____ Mailing Address (if different) _____ _____ Description of Business (be specific, attach additional sheets if necessary) _____ _____ Contractor License No./Type _____ Start Date _____ Resale No. _____ Federal ID No. _____ State ID No. _____	OFFICIAL USE ONLY BUSINESS LICENSE NO. _____ LICENSE FEE \$ _____ DATE PAID _____ <input type="checkbox"/> CASH / <input type="checkbox"/> CHECK EMPLOYEE _____ Ownership: <input type="checkbox"/> Corporation <input type="checkbox"/> Ltd. Liability Corp. <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Trust Business Type: <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Service <input type="checkbox"/> Contractor <input type="checkbox"/> Manufacturing
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Enter below names of Owners, Partners, or Corporate Officers – Use additional sheets as necessary

Owner Name _____	Title _____	Phone (____) _____
Home Address _____		Cell Phone (____) _____
Driver's License No. _____	Social Security No. _____	E-Mail _____
Owner Name _____	Title _____	Phone (____) _____
Home Address _____		Cell Phone (____) _____
Driver's License No. _____	Social Security No. _____	E-Mail _____

In case of emergency, please contact:

Name _____	Title _____	Phone (____) _____
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Alarm Company (if applicable)

Name _____	Title _____	Phone (____) _____
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PLEASE CALL 760-839-4659 WITH ESTIMATE OF ANNUAL GROSS RECEIPTS FOR BUSINESS LICENSE FEE DUE.

One Year Estimated Gross Receipts	\$ _____
Business License Fee	\$ _____
BID Fee (if Applicable)	\$ _____
TOTAL AMOUNT DUE	\$ _____

Thank you for doing business in the City of Escondido!

The business named above is being considered for a business license pursuant to the provisions of the Escondido Municipal Code to engage in, carry on, or conduct the business, trade, calling, or occupation described. Approval of this application is not an assurance the proposed use conforms to City zoning or other regulations and shall not relieve the applicant of compliance with building, zoning, fire, or other ordinances of the City or the State of California, nor shall approval be deemed a waiver of past or future violations of such laws, nor constitute a barrier to pursuit of appropriate legal action against the applicant for such violations. Applicant shall, once issued, renew the license before the expiration date.

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 ESCONDIDO

License Reviewed & Approved By:	
Police _____ / _____ Building _____ / _____ Fire _____ / _____ Code Enforcement _____ / _____	County Health _____ / _____ Planning _____ / _____ SLUC _____ B.I.D. _____ ZONING _____

OFFICIAL USE ONLY	
• Please Check One •	
NEW APPLICATION	<input type="checkbox"/>
CHANGE OF OWNER	<input type="checkbox"/>
CHANGE OF ADDRESS	<input type="checkbox"/>
CHANGE OF BUSINESS NAME	<input type="checkbox"/>
HOME OCCUPATION	<input type="checkbox"/>



CITY OF ESCONDIDO
Business License Division
201 North Broadway
Escondido, CA 92025-2798
(760) 839-4659

FOR OFFICE USE ONLY
BL#:
Zoning:
Overlay:
Approved By:
Date:

HOME OCCUPATION PERMIT SUPPLEMENTAL FORM

APPLICANT

Name:
Business Name:
Address:
City, State, Zip Code:
Phone Number:
Email Address:

RESIDENCE

Property Owner Renter
Type: Single Family Apartment/Condo Mobile Home
Size of Home: SF
Residence Parking: Garage Carport None
Size of Garage/Carport:
Number of Covered Parking Spaces:

TYPE OF BUSINESS

- Administrative/Business Office Contractor/Handyman Mobile Service/Repair Home Crafts Assembly
Manufacturing Online Retail/Wholesale Off-site Retail/Wholesale (Specify Location):
Other (Specify):

Description of Business Operations (Be Specific):

Will you be receiving business related deliveries at your home? Yes No
Frequency of deliveries: Number per Day Week Month
Specify the type and number of all equipment/materials to be used with your business:

WORK AREA

The home occupation may use up to 25% maximum of the structures on the premises. Up to 50% of the permitted area for the home occupation may be used for storage. Outside storage is not permitted. If the garage is used for all or part of the home occupation, the parking for the residence, as required by the Zoning Code, may not be eliminated and must be maintained.

Size of Work Area: SF In Residence In Garage In Enclosed Accessory Structure
Off-Site Work Area (Specify Location):

Size of Storage Area: SF In Residence In Garage In Enclosed Accessory Structure
Off-Site Storage (Specify Location):

BUSINESS VEHICLE(S)

Specify number of vehicles (including trailers) to be used with the business:
Personal Car/Van/Pick-Up Truck
Trailer(s) Length of Trailer (s) Where will the trailer(s) be parked/stored (address if off-site):
Commercial Vehicle(s) Where will the commercial vehicle(s) be parked/stored (address if offsite):

Please initial each line and sign and date below to indicate you understand and will comply with the following regulations.

HOME OCCUPATIONS
(Article 44 of the Escondido Zoning Code)

CONDITIONS: The following conditions are severally and jointly stated as absolute requirements and any home occupation not conforming to the following requirements shall not be permitted:

- ___ a. Employees or assistants, who are not occupants of the dwelling, shall not be employed on the premises.
- ___ b. The home occupation shall be conducted wholly within the structures of the premises and shall not exceed twenty-five percent (25%) of the total area of said structures.
- ___ c. Inventory and supplies for the home occupation shall not occupy more than fifty percent (50%) of the permitted area.
- ___ d. No customer services or sales of goods, wares or merchandise shall be made on the premises.
- ___ e. No signs of advertising shall be displayed on the premises except as may be expressly permitted by the Zoning Code.
- ___ f. No display of any kind shall be visible from the exterior of the premises.
- ___ g. No mechanical or electrical apparatus, equipment, or tools shall be permitted except those items which are commonly associated with residential use or are customary to home crafts.
- ___ h. All maintenance or service vehicles and equipment, or any vehicle bearing any advertisement related to the home occupation or any other similar vehicle shall be garaged or stored entirely within a building or structure.
- ___ i. The home occupation shall not generate pedestrian or vehicular traffic in excess of that customarily associated with the zone in which the use is located.
- ___ j. There shall be complete conformity to Fire, Building, Plumbing, Electrical and Health Codes and to all state and city laws and ordinances.
- ___ k. The home occupation shall not cause a demand for municipal or utility services or community facilities in excess of those usually and customarily provided for residential uses.
- ___ l. The home occupation shall not alter the residential character of the premises or unreasonably disturb the peace and quiet, including radio and television reception of the neighborhood by reason of color, design, materials, construction, lighting, sounds, noises or vibrations.
- ___ m. Any special conditions established by the Planning Director and made of record in the Home Occupation Permit, as he may deem necessary to carry out the intent of this Section, shall be met.
 - 1. Addresses shall not be used in any advertising (i.e., telephone directory, business cards, newspaper advertisements, bulletin boards, signs on vehicles, etc.).
- ___ n. All Home Occupation Permits are subject to immediate cancellation in the event that the zoning regulations applicable to the premises are amended to prohibit such use.

I have read and understand the conditions and limitations regarding Home Occupation (per Article 44 of the Escondido Zoning Code), and hereby certify compliance. Failure to comply is grounds for denial or revocation of my Home Occupation Permit. False or misleading information shall be grounds for denial of the Home Occupation Permit.

Signature

Date