CITY OF PLACERVILLE BUSINESS TAX CERTIFICATE APPLICATION

BUSINESS INFORMATION	
1. Business Name	Business Phone ()
2. Business Location (Street Address)	
3. City St	
4. Type of Business	
5. Will you be selling secondhand merchandise? Yes	No
If so, what type of merchandise will you be selling?	
6. Legal Formation: Corporation Partnership	Sole Proprietor Non-Profit
7. Mailing Address (If different than physical address)	
OWNER NAME & INFORMATION (For additional owners, please attach separate sheet)	
8. Owner Name	Owner Phone ()
9. Address	
10. City	StateZip
11. Email Address	
12. Title	
EMERGENCY CONTACT	
13. Name	Phone ()
ADDITIONAL INFORMATION	
14. State Board of Equalization No	
15. Are you a Contractor? Yes(Please complete Lines 16 and 17) No(Skip to Line 18)	
16. State Contractor's License Number	
17. Do you have proof of worker's compensation insurance?	
18. Will there be any building alterations, additions or repair to	o the business location? Yes No
19. Do you have employees? Yes(Please complete Lines 20 through 21) No	
20. Number of Employees	
21. State I.D. No. (SEIN) Federa	al I.D. No. (FEIN)
22. Standard Industrial Classification Code (SIC)	
By signing below, I am certifying that the above information is true and accurate to the best of my knowledge. I understand that the City of Placerville Business Tax is a revenue measure only, and is non-regulatory. The issuance of a business tax certificate by the City of Placerville is not certification that all building and safety codes have been met. Signature Title Date	
FOR CITY USE ONLY	
Business License Tax Downtown Surtax	Disability Access Fee Total
Receipt # Business Tax Number Iss	