

CITY OF MOUNTAIN VIEW
 ATTN: BUSINESS LICENSE
 POST OFFICE BOX 7540
 MOUNTAIN VIEW, CA 94039-7540
finance@mountainview.gov
 650-903-6317



APPLICATION FOR BUSINESS LICENSE

This application must be filed with the Finance and Administrative Services Department and the applicable Business License Tax paid prior to the commencement of the business.

PLEASE PRINT

Business Name		Business Address (Include Zip Code)		
Mailing Address (If Other than Business Address)		Business Telephone No.		Business Fax No.
Nature of Business		No. of Rental Units	No. of Employees	Business Address Square Footage
Name of Owner of Business		Date Business Started (in Mountain View)		State Sales Tax No.
Home Address of Owner		Contact Person		Contact Person's Phone No.
Home Telephone No.	Type of Ownership:	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation
		<input type="checkbox"/> Trust	<input type="checkbox"/> LLC	<input type="checkbox"/> LLP
Business E-mail		NAICS Code (6 digits)		Mountain View Code (4 digits)

THIS INFORMATION IS NOT A COMPLETE LISTING OF CLEARANCES THAT MIGHT BE REQUIRED

1. If you intend to alter, remodel, relocate, or install any structural, electrical, plumbing, or mechanical portions of the building, you will need to obtain building permits from the Building Inspection Division of the Community Development Department at 650-903-6313.
2. Businesses involving any use changes, exterior building changes, or sign changes are advised to secure Community Development Department approval prior to lease execution or purchase. Contact the Community Development Department at 650-903-6306.
3. Businesses operated out of the home must comply with Home Occupation Regulations (Section 36.28.75 of the City Code).
4. If you intend to serve food or beverages on the premises, you must obtain approval from the Santa Clara County Health Department. For information, call 408-918-3400. _____ Health Certificate No.
5. If your business uses or stores hazardous materials (including paints, thinners, solvents, acids, compressed gases, etc.), you may be required to obtain a Hazardous Materials Permit from the Fire Department. **NOTE:** Certain hazardous materials and processes such as spray-painting, welding, etc., are NOT ALLOWED in certain buildings. Contact the Fire Department at 650-903-6378 for information on permitted uses within the City.
6. Industries discharging processed wastewater down the sewer, such as machining fluid, water from glass washing, chemical neutralization, etc., may be required to obtain a Wastewater Discharge Permit from the Fire Department. For more information, call 650-903-6378.
7. Police Department approval is required for live entertainment, gaming, massage establishments, and outcall massage services. For more information, call 650-903-6350. _____ Police Department Approval
8. If there is a change of ownership, business name, or location, you are required to obtain a new business license and are subject to any associated fees and approvals. For more information, contact the Finance and Administrative Services Department at 650-903-6317.

NOTICE: I understand that payment of this business tax does NOT represent approval of my use/business with respect to zoning, County Health Department approval, hazardous materials use or storage, wastewater discharge, or any other requirement. Further, I recognize that it is my responsibility to secure appropriate clearances and that it is advisable for me to secure such requisite approvals prior to establishing this business and paying this business tax.

Applicant's Signature _____ Date _____

FOR CONTRACTORS

I herewith certify that I have been licensed pursuant to the provisions of Chapter 9 of Division 3 of the Business and Professions Code of the State of California and that my license is in full force and effect.

License No. _____

Signature _____

FOR HOME OCCUPATIONS

I am aware of the nine restrictions on "Home Occupations" per Section 36.28.75 of the City Code and will conform thereto if this license is granted.

Signature _____

FOR OFFICE USE				Approved for Use	
Date Paid _____	Cashier _____	Receipt No. _____	Total Paid _____		
Fee _____	SB 1186 _____	BID 1 _____	BID 2 _____	Penalty _____	
				Planner Signature _____	

BUSINESS LICENSE INFORMATION IS PUBLIC RECORD