



CITY OF ANTIOCH BUSINESS LICENSE APPLICATION

BUSINESS #:
CLASS CODE:

INSTRUCTIONS:

For taxi cabs and/or limo services: please provide a copy of the current Police Department Annual Permit.
For massage therapist and/or massage practitioner: please fill out City of Antioch Registration of Massage Therapist and provide a copy of the State Issued Certification.
For In-Home Business: please provide a copy of your approved Home Occupation Use Permit (HOUP) from Community Development Department.
For Food Establishments: please provide a copy of your Health Certificate & ABC License, if applicable.
For Non-Profit organizations: please provide a copy of your non-profit status, form IRS 501C.

1. MAILING NAME & ADDRESS		2. BUSINESS NAME & PHYSICAL ADDRESS (no PO Boxes)	
3. BUSINESS PHONE	4. FAX NUMBER	5. EMAIL ADDRESS	
6. BUSINESS DESCRIPTION			
7. NUMBER OF EMPLOYEES		8. SELLER'S PERMIT# (COPY REQUIRED)	
9. HOME OCCUPATION# (COPY REQUIRED)		10. MASSAGE CERTIFICATION # AND EXPIRATION DATE (COPY REQUIRED)	
11. OWNER TYPE (Sole Proprietorship, Partnership, CORP, Trust)		12. FED ID#	13. STATE ID#
14. OWNER NAME & PHYSICAL ADDRESS (NO PO BOX, STATE REQUIREMENT)		15. CONTACT NAME & ADDRESS	
14A. OWNER'S PHONE #		15A. CONTACT PHONE #	
14B. OWNER'S EMAIL ADDRESS		15B. CONTACT'S EMAIL ADDRESS	
14C. OWNER#1 SSN	14D. OWNER#1 DL	16. NUMBER OF VEHICLES (IF APPLICABLE)	17. NUMBER OF CARD TABLES (IF APPLICABLE)
18. GROSS RECEIPTS (REQUIRED)	19. LICENSE TAX	19A. STATE MANDATED FEE	19B. APPLICATION FEE
19C. STICKER FEE (TAXI AND LIMOS ONLY) \$5.00/VEHICLE			
20. TOTAL AMOUNT DUE (combine boxes 19, 19A, 19B, & 19C)			
OFFICE USE ONLY DATE: _____ RECEIPT#: _____		OFFICE USE ONLY PLANNING: _____ BLDG DEPT: _____ ZONING: _____	

The undersigned, being authorized to make this Application, hereby declares to the best of his knowledge and belief that this is a true, correct, and complete information made pursuant to the Antioch Municipal Code. The undersigned also agrees to abide by all considerations and restrictions imposed under the Antioch Municipal Code. This business license does not authorize holder to engage in any business or profession for which other certificates or permits are required. Boxes 1, 2, 3 and 14 are non-confidential information and may be made public.

THIS APPLICATION IS CONSIDERED INCOMPLETE WIHTOUT SIGNATURE AND DATE.

Sign Here

SIGNATURE (REQUIRED)

DATE (REQUIRED)

BUSINESS LICENSE CALCULATION WORKSHEET

CLASSIFICATION AND RATE SCHEDULE

GROSS RECEIPTS (REQUIRED): Gross receipts include the total amount actually received from sales or service. If you were in business for the entire preceding calendar year, your current year tax is based on the prior year's receipts. If your business was not in operation 12 months prior to the time of application, use an estimate of a 12-month period. (Refer to City Ordinance § 3-1.201)

PROFESSIONAL: Only as defined, per profession, and listed in City Ordinance § 3-1.218A1. The owner of such business shall pay a business license tax based on gross receipts as provided in 3.1.201 provided that the maximum annual tax payable under this section shall be \$312.50 annually.

OTHER BUSINESS LICENSE TAX: This category is used by the following: delivery trucks/wholesale sales, non-profit organizations and landlords.

NEW BUSINESS OR CHANGES TO CURRENT BUSINESSES: A \$25.00 application fee is due. (Refer to City Ordinance § 3-1.121B)

OTHER BUSINESS LICENSE FEE: This fee is to be paid in addition to business license tax and other mandatory pass thru fees. For each returned item you will be charged a \$80.00 Returned Item Fee.

GROSS RECEIPTS TAX CALCULATION SCHEDULE

From:	To:	License Tax is:
\$0	\$1,000,000	\$1.25 per \$1,000 - \$100.00 minimum ALL BUSINESSES, except Home Occupation Use Permit (HOUP) & Residential Landlords
\$1,000,000	and above	\$1,250 PLUS .20¢ per \$1000 in excess of \$1,000,000

OTHER BUSINESS LICENSE TAX

Class Code	Description	Amount
3	Delivery Truck/Wholesale Sales	\$115.00
4	Non-Profit	\$0.00
HOUP	Home Occupation Use Permit (HOUP) <i>NON-PROFESSIONAL</i> businesses only	See tax schedule on left
LLSFD	Landlord-Residential Single Family dwelling - per unit	\$250.00
LLMFD	Landlord-Residential Multi Family dwelling - per unit	\$150.00

NON-PROFESSIONAL HOME OCCUPATION USE PERMIT (HOUP)

From:	To:	License Tax is:
\$0	\$1,000,000	\$1.25 per \$1000 - \$25.00 minimum for non-professional Home Occupation Use Permit (HOUP) businesses
\$1,000,000	and above	\$1,250 PLUS .20¢ per \$1000 in excess of \$1,000,000

GROSS RECEIPTS CALCULATION WORKSHEET

Gross Receipt Amount	License Tax
\$0.00-\$1,000,000	/ 1,000 x \$1.25 =
Over \$1,000,000	/ 1,000 x \$0.20 =
Total =	

OTHER BUSINESS LICENSE FEES

Box #	Description	Amount
19A	Renewal Processing Fee	\$10.00
19B	State Mandated Fee -see below	\$4.00
19C	Penalty fees	See Below
19D	Non-refundable application fee and delinquent business license over 60 days	\$25.00
19E	Sticker fee (limos and taxis only)	\$5.00/vehicle

Example #1 (gross receipts under \$1,000,000):

If your gross receipts are \$435,987.20. calculate as follows:

$$\$435,987.20 / 1,000 \times \$1.25 = \mathbf{\$544.98}$$

Example #2 (gross receipts over \$1,000,000):

If your gross receipts are \$1,375,123.56, calculate as follows:

$$\$1,375,123.56 - \$1,000,000 = \$375,123.56; \text{ then, } (\$375,123.56 / 1,000 \times .20) + \$1,250.00 = \mathbf{\$1,325.02}$$

DELINQUENT PENALTIES, based on date received. (AMC § 3-1.120D)

Period	Penalty Assessed
30 days after expiration date	10% of tax (box 19)
60 days after expiration date	30% of tax plus \$25 reapplication fee
90 days after expiration date	50% of tax plus \$25 reapplication fee

AVOID PENALTIES OF UP TO 50%, FILE AND PAY ON TIME!

For online renewal, please go to: <https://antioch.onestoppayments.net/webrenewals/>. You will need your business # (Account number) and security code listed on the top right of your renewal application. Changes can also be made online.

Box 19B: Governor Brown signed into law SB1186 effective January 1, 2018 until December 31, 2023 which adds a state fee of \$4 on any applicant for a local business license or similar instrument or permit, or renewal thereof. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop education resources for businesses in order to facilitate compliance with federal and state disability laws, as specified. Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:

· The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx.

· The Department of Rehabilitation at www.rehab.cahwnet.gov.

· The California Commission on Disability Access at www.cdda.ca.gov.