



City OF Huntington Park
6550 Miles Ave Room 127
Huntington Park, CA 90255
(323)584-6232

Application Rental Property
 Account Number (FOR OFFICE USE ONLY)

I/We hereon make application for a "Business License" to:

Name of Business or DBA _____ Business Phone Number _____
 Business Address _____ Business City _____ Zip Code _____
 Mailing Address _____ City _____ Zip Code _____
 Business Description _____

No. of Commercial Units _____ Business Start Date _____ SEIN Number _____ FEIN Number _____
 \$ _____
 Gross Sales/Commission For The First Year In Business _____

Owner's Name _____ Owner's Home Phone Number _____
 Owner's Address _____ City _____ Zip Code _____

Driver's License Number _____ State _____ Social Security Number _____

Emergency Contact Person _____ Phone number _____ email address _____

Owner's Name/ Corporate Officers Name _____ Owner's/ Corporate Officer's Home Phone Number _____

Owner's/Corporate Officers Address _____ City _____ Zip Code _____

Driver's License Number _____ State _____ Social Security Number _____

Emergency Contact Person _____ Phone number _____ email address _____

Check If Applicable:

- New Business
- Change of Owner
- Change of Address
- Change of Business Name

Ownership Type:

- Sole
- Partnership
- LLC
- Corporation
- Trust

Office Use Only:

Gross Receipts \$ _____
 \$5,000 Credit \$ _____
 Processing Fee \$75.00
 SB1186 \$4.00

Total Due \$ _____

"I declare, Under penalty of perjury; that this application, return or statement (including any accompanying schedules, statements, and supporting data) has been examined by me, and to the best of my knowledge, information, and belief is a full true correct, application, return, or statement."

Today's Date _____ Signature of Owner or Authorized Agent _____

For Office Use Only

- Verified Ownership
- Verified Gross Receipts
- Verified Driver's License/Identification

Verified by _____ on _____