



BUSINESS LICENSE APPLICATION

FINANCE DEPARTMENT • 200 H STREET

PO BOX 5007, ANTIOCH CA 94531

PHONE: 925-779-7059 • FAX: 925-779-7054

E-MAIL: FINBUSLIC@ANTIOCHCA.GOV

PLEASE TYPE OR PRINT CLEARLY - ALL BOLD* INFORMATION IS REQUIRED

1. BUSINESS NAME* _____ 2. BUSINESS LOCATION* _____ (NO PO BOXES) 3. MAILING ADDRESS _____ (IF DIFFERENT FROM #2) 4. BUSINESS PHONE* _____ 5. FAX _____ 6. EMAIL ADDRESS _____ 7. DESCRIPTION OF BUSINESS* _____ 8. NUMBER OF EMPLOYEES _____ 9. SELLERS PERMIT # _____ 10. FEDERAL TAX ID # _____ 11. STATE TAX ID # _____	PLEASE CHECK APPLICABLE <input type="radio"/> NEW APPLICATION <input type="radio"/> HOME BUSINESS <input type="radio"/> CHANGE OF BUSINESS NAME <input type="radio"/> CHANGE OF ADDRESS
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NAME OF OWNERS OR CORPORATE OFFICERS, ATTACH ADDITIONAL PAGE IF NEEDED.

12. OWNER NAME* _____	13. DL # * _____
14. HOME/PHYSICAL ADDRESS* _____	
15. EMAIL ADDRESS _____	16. PHONE # _____
17. OWNER TYPE* <input type="radio"/> SOLE PROPRIETORSHIP <input type="radio"/> PARTNERSHIP <input type="radio"/> CORPORATION <input type="radio"/> LLC <input type="radio"/> TRUST <input type="radio"/> NON-PROFIT (ATTACH 501c3)	

ENTER NAME FOR PRIMARY CONTACT (IF DIFFERENT FROM OWNER INFORMATION)

18. CONTACT NAME _____	19. TITLE _____
20. CONTACT ADDRESS _____	
21. EMAIL ADDRESS _____	22. PHONE # _____

PLEASE ANSWER THE FOLLOWING QUESTIONS REGARDING YOUR BUSINESS ACTIVITY

23. HOME BUSINESS*	I UNDERSTAND I AM REQUIRED TO OBTAIN A HOME OCCUPATION USE PERMIT FROM COMMUNITY DEVELOPMENT PRIOR TO APPLYING FOR MY BUSINESS LICENSE.	YES	NO	N/A
24. MESSAGE THERAPY*	I UNDERSTAND I AM REQUIRED TO OBTAIN A MESSAGE ESTABLISHMENT PERMIT FROM THE POLICE DEPARTMENT PRIOR TO APPLYING FOR MY BUSINESS LICENSE.	YES	NO	N/A

BUSINESS LICENSE TAX AND FEES (PLEASE SEE REVERSE SIDE)

25. GROSS RECEIPTS*	28. LICENSE TAX DUE	\$ _____
IN ANTIOCH ONLY _____	29. APPLICATION FEE	\$ 25.00
26. NUMBER OF VEHICLES	30. STATE MANDATED FEE	\$ 4.00
(TAXI & LIMO ONLY - \$5.00 STICKER PER VEHICLE) _____	31. PENALTY	\$ N/A
27. NUMBER OF CARD TABLES	32. RENEWAL PROCESSING FEE	\$ N/A
_____	33. STICKER FEE (TAXI & LIMO ONLY)	\$ _____
	34. TOTAL AMOUNT DUE (ADD #28-33)	\$ _____

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. This business license must be renewed annually and posted in a conspicuous place.

SIGNATURE* _____ **DATE*** _____

OFFICE USE ONLY

ACCOUNT # _____	PLANNING _____	RECEIPT # _____
CLASS CODE _____	ZONING _____	DATE _____
HOUP # _____	BUILDING _____	

BUSINESS LICENSE CLASSIFICATION AND RATE SCHEDULE

Instructions

Please review information and make corrections as needed on this form. Match the Class Code listed on the top left of your renewal application to Box A for Business License Tax instructions and amounts. Class Code 0 and HOUP are required to provide gross receipts. If paid online by your due date, you can save the \$10 renewal processing fee. Any payments in person, by mail, or late payments will be subject to pay penalties and all fees. Payments are not able to be made over the phone. Please make any checks payable to: City of Antioch and include your account number on the check memo. If business is now closed or no longer doing business in/from Antioch, it is the account holders responsibility to notify the City.

(A) BUSINESS LICENSE TAX - LINE 2

Class Code	Description	Amount
0	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 for 12 months prior to the time of application, use an estimate of a 12-month period. (AMC § 3-1.201)	See box C
1	Professional - Only as defined, per profession as 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.	\$312.50 maximum
3	Delivery Truck/Wholesale Sales	\$115.00
4	Non-Profit	\$0.00
HOUP	Home Occupation Use Permit (NON PROFESSIONAL businesses only) Gross receipts include the total amount actually received from sales or service.	See box D
LLMFD	Landlord-Residential Multi Family dwelling - per unit	\$150.00
LLSFD	Landlord-Residential Single Family dwelling - per unit	\$250.00

(B) OTHER BUSINESS LICENSE FEES

Line #	Description	Amount
3	Penalty Fees	See box E
4	Renewal Processing Fee	\$10.00
5	State Mandated Fee - Governor Brown signed into law SB1186 effective January 1, 2018 until December 31, 2023 - 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.	\$4.00
6	Non-refundable application fee for new applications and delinquent business license over 60 days	\$25.00
7	Sticker fee (limos and taxis only)	\$5.00 per vehicle
Return Items	This fee is to be paid in additional to the business license tax and other mandatory pass through fees for each returned item	\$80.00

(C) 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 \$1,000 in excess of \$1,000,000

(D) HOME OCCUPATION USE PERMIT (HOUP)

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

(E) DELINQUENT PENALTIES (AMC § 3-1.120D)

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

ONLINE PAYMENTS: Please go to: <https://antioch.progressivecloud.net/webrenewals/>. You will need your Account Number and Security Code listed on the top left of your renewal application. Changes can also be made online.

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

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: www.dgs.ca.gov/dsa
- The Department of Rehabilitation: www.dor.ca.gov
- The California Commission on Disability Access: www.dgs.ca.gov/CCDA