



**City of Guadalupe**  
**918 Obispo Street**  
**P.O. Box 908**  
**Guadalupe, CA 93434**  
**805-356-3896**

**BUSINESS LICENSE APPLICATION  
 AND  
 GROSS RECEIPTS TAX FORM**

**Business Name:** \_\_\_\_\_ **Business ID:** \_\_\_\_\_

Business Address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Billing Contact Name: \_\_\_\_\_

Billing Contact Phone number: \_\_\_\_\_ Billing E-Mail Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Ownership Type:  Corporation  Partnership  Sole Proprietor  Other: \_\_\_\_\_

Business Description: \_\_\_\_\_

Federal Employer ID (or Social Security Number): \_\_\_\_\_ State Contractor's License (if applicable): \_\_\_\_\_

New Business Start Date (if applicable): \_\_\_\_\_

**Principal Owner/Officer/Partner:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

- |  |    |                |
|--|----|----------------|
| <p>1) <b>Enter last year's Gross Receipts. (If new business, enter "None"):</b><br/>         Gross Receipts "shall mean and include the total amounts received or receivable from sales, services, rentals, or leases for the performance of any act or service of whatever nature it may be."<br/>         The City is "authorized to examine such books and records of any applicant for a business tax certificate as may be necessary to verify the amount of the business tax due."</p> | \$ | _____          |
|  |    | <b>x .0005</b> |
| <p>2) <b>Tax due based on Gross Receipts:</b><br/>         Multiply Line 1 by .0005 (50¢ per \$1000).</p>  | \$ | _____          |
| <p>3) <b>Minimum Tax Due:</b><br/>         If home occupation or no fixed place of business in Guadalupe, enter \$100.<br/>         Enter \$200 for fixed place of business in Guadalupe.</p>  | \$ | _____          |
| <p>4) <b>Actual Tax Due:</b><br/>         Enter greater of Line 2 or Line 3</p>  | \$ | _____          |
| <p>5.) <b>Delinquent Fee: 10% of line 4 if paid after 7/31</b></p>   | \$ | _____          |
| <p>6.) <b>SB1186 Mandatory disability access and ADA compliance fee</b></p>  |    | \$1.00         |
| <p>7.) <b>Total Due:</b> (add lines 4, 5 and 6)</p>  | \$ | _____          |

**Return this signed form with check payable to the City of Guadalupe by June 30<sup>th</sup>.  
 Interest and penalties will be assessed for late filing.**

I certify under penalty of perjury that the above information is true and correct to the best of my knowledge and belief:

\_\_\_\_\_  
 Signature of Owner or Representative

\_\_\_\_\_  
 Date