



County of Yolo

Department of Community Services

292 West Beamer Street Woodland, Ca 95695-2598
(530) 666-8775 FAX (530) 666-8156

STAFF USE ONLY:	
Receipt #	_____
\$	_____ Non-refundable
Fee	_____
Date:	_____ Initials: _____
NAICS Code:	_____
Bus. Lic #	_____

BUSINESS LICENSE APPLICATION

(1) Application is for: (select one)
New Business Change of Owner Change of Name

(2) DBA – Name of Business: _____

(3) Business Address: _____

Email Address _____
Phone Number: _____

(4) Mailing Address: _____

(5) Describe your Business in Detail/ Daily Activity:

(6) State Contractor License #: _____
License Class (es) _____ Expire Date: _____

(7) Type of Organization (select one)
Sole Owner / Partnership / Corp. / Limited Liability Corp.

(8) List all Owners / Partners Names & Addresses:

Phone Numbers: _____
(Only listed persons can change the license if needed)

(9) Local Contact Name & Address: _____

Phone Number: _____

(10) Is the Business location in the UNINCORPORATED area of Yolo County? (YES / NO) (If NO skip to item #15.)

(11) Assessor's Parcel Number of Business Location:
_____ - _____ - _____

(12) Nearest Cross Street: _____

(13) Will a private home or residence be all or part of your Business premises?
(If yes, a "HOME OCCUPATION BUSINESS LICENSE SUPPLEMENTAL APPLICATION" must be completed)

(14) Has the Planning Commission/ Board of Supervisors issued a Use Permit for the Business?
If yes, provide Number: _____

(15) ITINERANT BUSINESS REQUIREMENTS apply to persons conducting Businesses without a fixed place of Business who occupy private property or a Public easement or right-of-way adjoining private property. Is this application for an "Itinerant Business"? (YES / NO) (Attach a separate sheet if needed). If yes, then see item #15 of the instructions for additional requirements

(16) A. Will the following materials be dispensed, stored, distributed or used in the normal course of your business activity?

1. Food or drink intended for human consumption?.....	Yes	No
2. Alcoholic beverages?.....	Yes	No
3. Drugs, narcotics or controlled substances?.....	Yes	No
4. Firearms, ammunition, or explosives?.....	Yes	No
5. Adults only, X-rated, or sexually-oriented materials?	Yes	No
6. Hazardous materials, radioactive materials or known human carcinogens?.....	Yes	No

If yes; complete and attach a "Hazardous Materials and Air Pollution Survey"

7. Are any Hazardous materials stored underground?..... Yes No

8. Does your business include: bulk agricultural products, chemicals, plastics, dry cleaning, cogeneration, bulk food processing, Mining, incineration, production, woodworking, solvent use (painting, finishing, degreasing, printing) or ground water soil remediation?..... Yes No

If yes; complete and attach a "Hazardous Materials and Air Pollution Survey"

B. Will you, AT ANY TIME, use and/or provide facilities for the following on your premises? Yes No

Select all that apply: taxi cabs ambulances pool or billiards card games

swimming sauna's steam rooms spa's massages

C. Will any portion of your business be conducted outside of a completely enclosed building? Yes No

If yes explain: _____

(17) I declare under penalty of perjury that, to the best of my knowledge, the information provided herein on this application is true and correct.

Executed on _____ at _____

Applicant's Name (print): _____

Address _____ City _____ State _____ Zip Code _____

Applicant's Signature: _____ Relationship to business _____

BUSINESS LICENSE APPLICATION INSTRUCTIONS

2. **Name of Business (DBA)** - When required a **Fictitious Name Statement** must be filed at the Yolo County Clerk Recorder Office, 530-666-8130.
3. **Business Address** - Provide the **PHYSICAL** address where the business is located. Provide valid **EMAIL ADDRESS (required)** and Phone Number.
4. **Mailing Address (if different than site address)** - Your license, renewal and all other correspondence will be sent to this address.
5. **Describe your Business in DETAIL** - BE SPECIFIC, and indicate if you are one of the following: manufacturing; contractor; construction; transportation or communications; wholesale trade; retail trade; finance; insurance or real estate; a service type business which is personal; automotive repair; health; social; recreational; or another type service. **USE A SEPARATE SHEET FOR ADDITIONAL DETAILS IF NEEDED.**
6. **Contractors** must provide their license number, license class(es), expiration date, and show proof of workers compensation issuance.
8. **Owner's Name Home Address** - If the owner is a corporation, give the corporate home office. If the ownership is sole owner or partnership, give name and residence address(es) and phone number(s) of the owner or partner(s). Only the listed owner(s), partner(s) or officer(s) can make changes to a license.
9. **Local Contact for Business** - Provide a person that can be contacted in the case of an emergency regarding the business. (if other than the Owner)
12. **Nearest Cross Street** - Nearest cross street to your business location.
13. **Will a Private Home...** - When **any** portion of a business is conducted from, at or in a residence answer YES and complete a "Home Occupation Compliance Record".
14. **Use Permit** - If a Use Permit has been issued, provide the Use Permit number and a brief description.
15. **ITINERANT BUSINESS** - In addition to the application the following must be provided in writing:
 - A. Specify if owner or applicant has been convicted of a felony?
 - B. Provide facts and details of the business for the Sheriff-Coroner and the Business License Officer, so they can determine if the Standards of Title 12-3 of the Yolo County Code have been met.
 - C. Provide written consent of the property owner or adjoining property owner to conduct the business.
16. **A, B & C** -The term "hazardous materials" is very broad and includes fuels, solvents and many common chemicals. For more information call the Yolo County Emergency Service Coordinator at 530-666-8930. If you need to add additional details, use a separate sheet.
17. **Executed on (Give Date) AT (Give City)** , California.
Applicant's Signature- If the applicant is not the business owner, give your name, title or relationship to the business, home address and phone number in the space provided below your signature.

INCOMPLETE APPLICATIONS, APPLICATIONS NOT ACCOMPANIED WITH THE CORRECT FEES OR APPLICATIONS WITH INSUFFICIENT INFORMATION MAY BE DELAYED OR RETURNED.

ALL BUSINESSES ARE REQUIRED TO BE LICENSED

"Business" means any trade, manufacturer, profession, occupation or service of all and every kind, whether or not carried on for profit or for charitable, philanthropic, or other purposes, including the arrangement of business transactions, holding of sales or training meetings and administrative conferences, the receipt of customer or client payments and the keeping of records and accounts pertaining to a business.

"Business" does not mean: 1. Apartments, rooming houses, duplexes or other residential facilities in which living units are rented or leased for a term of 30 days or longer.

2. Churches to the extent that the use is for worship, religious education, or social affairs primarily for members of the religious group (this exception does not extend to other activities not undertaken primarily for members of the religious group such as day schools and social services programs).

3. Offices, stores, or other facilities maintained without paid employees by a nonprofit public benefit corporation.

4. Persons who furnish vending machines located on the premises of a person holding a valid business license.

Agricultural exemptions for products sold by producers: No license is required for a business undertaken by an agricultural producer in the production of products of cultivation of the soil and its fruits and raising and harvesting crops or products or the rearing, feeding, and management of livestock, or for any business extending service to an agricultural producer which service is normally accomplished by the producer in the production of agricultural products.



COUNTY OF YOLO COUNTY

Department of Community Services

Environmental Health Division

292 W. Beamer Street, Woodland CA 95695

Phone: (530) 666-8646 Fax: (530) 669-1448

ENVIRONMENTAL HEALTH LAND USE REVIEW SURVEY

A building or business license application may require a review from Yolo County Environmental Health (YCEH) to ensure the compliance with County, State and Federal laws and regulations. Please complete this survey and answer questions pertaining to each YCEH unit and submit it as part of your complete application.

Site address:	City:	Zip code:
Existing business? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of business:	
Property and/or owner of business name:		
Phone number:	Email:	
Mailing address:	City:	Zip code:

Project Description: _____

Please answer the questions below pertaining to different units in Environmental Health to the best of your knowledge:

For Land Use Unit

1. Will your building or facility use a well for your drinking water source? Yes No
2. Will your building or facility use an onsite wastewater treatment system (i.e. septic system)? Yes No
3. Will your building or facility generate waste tires onsite? Yes No
4. Will your building or facility haul 10 or more waste tires at one time? Yes No
5. Will your building or facility conduct solid waste related operations including chipping, grinding and composting?
 Yes No
6. Are there unused septic tanks and/or wells on this site? Yes No

For Consumer Protection Unit

1. Will your building or facility store, prepare, package, serve, vend, or otherwise provide food for human consumption at the retail level? Yes No (*"Retail" means the storing, preparing, serving, manufacturing, packaging, transporting, salvaging, or otherwise handling food (any edible substance incl. beverage and ice) for dispensing or sale directly to the consumer or indirectly through a delivery service.*)
2. Will your building or facility have a public pool/spa? (A public pool/spa includes but is not limited to pools/spas located at hotels, motels, apartments, schools, health clubs etc.) Yes No
3. Will your building or facility be used for tattooing, body piercing or permanent cosmetics? Yes No

For Hazardous Materials Unit

1. Will your building or facility handle or store any hazardous materials (a hazardous material is a chemical that is flammable, corrosive, reactive or toxic)? Yes No
2. Will your building or facility generate hazardous materials waste (i.e. used oil)? Yes No
3. Are there unused/abandoned hazardous materials storage containers on this site? Yes No

**** Please turn over to complete and sign form ****

If you answered "yes" to Hazardous Materials question #1 or #2, please complete questions 1-10 below. Otherwise, you can skip the following questions:

1. Will your commercial facility handle any hazardous materials in quantities greater than 500 pounds, 55 gallons or 200 cubic feet of compressed gas? Yes No

2. Will your commercial facility repair or maintain motor vehicles or motorized equipment? Yes No
If yes, will your facility handle any of the following?
Motor oil Yes No Gasoline Yes No Grease Yes No
Antifreeze Yes No Hydraulic Oil Yes No Diesel Yes No

4. Will your commercial facility have an above ground storage tank (AST?) Yes No

5. Will your commercial facility sell motor vehicle fuel? Yes No
If yes, will your commercial facility have an underground storage tank (UST?) Yes No

6. Will your commercial facility engage in welding operations? Yes No
If yes, will your commercial facility handle more than one cylinder of acetylene, oxygen, shielding or other welding gases? Yes No

6. Will your commercial facility operate forklifts? Yes No
If yes, will your facility store more than one extra cylinder of propane? Yes No

7. Will your commercial facility store batteries with 55 gallons or more of acid? Yes No

8. Will your commercial facility engage in photography? Yes No
If yes, will your commercial facility generate photographic waste fluid? Yes No

9. Will your commercial facility engage in x-ray processing? Yes No
If yes, will your commercial facility generate x-ray processing waste fluid? Yes No

10. Will your facility handle yard trimmings, untreated wood wastes, natural fiber waste, or construction and demolition wood waste? Yes No
If yes, are these materials managed in a way which would allow them to reach 122 degrees Fahrenheit? Yes No

If you answered "yes" to any of the above questions under hazardous materials unit, you may be required by State law to submit a Hazardous Materials Business Plan to YCEH. Failure to comply with this requirement could result in fines of up to \$2,000.00 per day. As of January 1, 2013, business plans must be filed by going to the California Environmental Reporting System (CERS) website (<http://cers.calepa.ca.gov>), creating an account, entering required hazardous materials information, and submitting the information for approval by YCEH. For assistance with CERS submittal, please call our office at (530) 666-8646 and ask to speak with a hazmat specialist.

I hereby certify that the information in this document is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Print Name: _____ Title: _____