



**BUSINESS LICENSE APPLICATION**

701 Fourth Street • Yreka, CA 96097  
(530) 841-2325 • FAX (530) 842-4836

[www.ci.yreka.ca.us](http://www.ci.yreka.ca.us)

Business Start Date (in Yreka): \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Location: \_\_\_\_\_

Business Mailing Address (If Different): \_\_\_\_\_

Type of Business: Sole: \_\_\_\_\_ Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_

Non-Profit Status with IRS: Yes: \_\_\_\_\_ No: \_\_\_\_\_ **Must provide proof of Non-Profit Status with application**

Driver's License # or CA ID # or Corporation ID #: \_\_\_\_\_

Board of Equalization Sales Tax #: \_\_\_\_\_ Contractor's License #: \_\_\_\_\_

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

Business Owners Name: \_\_\_\_\_

If a Partnership or Corporation, list names of the principal parties: \_\_\_\_\_

Email (optional): \_\_\_\_\_ Residence/Cell Phone: \_\_\_\_\_

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

Worker's Compensation Policy No. (Contractors Only): \_\_\_\_\_

**(COPY OF DECLARATION PAGE OF POLICY MUST ACCOMPANY THIS APPLICATION)**

**This information is subject to disclosure pursuant to the California Public Records Act**

I understand and acknowledge that issuance of a City business license may require proof of authorization from other agencies and does not authorize a person to conduct an unlawful business or to conduct a business that is not in compliance with all other rules, regulations and statutes of the federal, state and county governments and City of Yreka. I, the undersigned, certify under penalty of perjury that the information included with this application is true and correct.

I declare my name is \_\_\_\_\_ and that this

was executed on \_\_\_\_\_ (PRINT NAME)  
\_\_\_\_\_ (DATE) at \_\_\_\_\_ (LOCATION)

\_\_\_\_\_  
(SIGNATURE)

**Business License Fee \_\_\_\_\_ (Business License fee includes State Mandated Disability Access & Education Revolving Fund Fee of \$4.00)**

Under federal and state law, compliance with disability access law 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 by visiting

\* The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx)

\* The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov)

\* The California Commission of Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov)