

# BUSINESS LICENSE TAX APPLICATION

THIS APPLICATION MUST BE FILLED OUT  
COMPLETELY AND SIGNED BEFORE LICENSE  
CAN BE ISSUED



6000 Heritage Trail  
Clayton, California 94517-1250  
Attn: Business License Coordinator  
(925) 673-7300

|  |  |
|--|--|
| <b>Business Name</b> _____<br><b>Business Location</b> _____<br><small>(Cannot be P.O. Box per State of California, Business &amp; Professions Code-Section 17538.5)</small><br><b>Mailing Address</b> _____<br>_____<br><b>Bus. Phone ( )</b> _____ <b>Bus. Fax ( )</b> _____<br><b>Description of Business</b> _____<br><b>Ownership:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> Corp-Ltd Liability <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Trust <input type="checkbox"/> Non Profit | <b>Home Occupation</b> <input type="checkbox"/> YES <input type="checkbox"/> NO<br>If yes, Home Occupation permit required.<br><hr/> <b>BUSINESS LICENSE NO.</b> _____<br><b>EXPIRATION DATE</b> _____<br>• Initial and Date •<br>Planning _____<br>Date Paid _____<br>Amount Paid _____<br>Receipt No. _____<br>Rate Type _____<br>SIC Code _____ |
| <b>State Lic. No.</b> _____ <b>Lic. Type</b> _____ <b>Expiration Date</b> _____ <b>Start Date</b> _____<br><b>Resale No.</b> _____ <b>Federal ID No.</b> _____ <b>State ID No.</b> _____ <b>No. of Employees:</b> _____  |  |

**Enter below names of Owners, Partners, or Corporate Officers**

|  |  |
|--|--|
| <b>Owner Name</b> _____ <b>Title</b> _____<br><b>Home Address</b> _____<br><small>(Cannot be P.O. Box)</small> | <b>Phone ( )</b> _____<br><b>Cell Phone ( )</b> _____<br><b>Drivers Lic. No.</b> _____ |
| <b>Owner Name</b> _____ <b>Title</b> _____<br><b>Home Address</b> _____<br><small>(Cannot be P.O. Box)</small> | <b>Phone ( )</b> _____<br><b>Cell Phone ( )</b> _____<br><b>Drivers Lic. No.</b> _____ |

**If Renting Business Address - Please complete this section**

**Owner of Property** \_\_\_\_\_ **Phone ( )** \_\_\_\_\_  
**Address** \_\_\_\_\_

**• SEE REVERSE SIDE FOR SCHEDULE OF TAXES •**

|   |                                    |          |
|---|------------------------------------|----------|
| <b>If SALES or SERVICE BUSINESS:</b> Enter your estimated GROSS RECEIPTS  | \$                                 |          |
|   | <small>Enter your tax here</small> | \$       |
| <b>If OFFICE ONLY,</b> and you have no sales or service with Clayton:<br>Enter your estimated GROSS EXPENSES from starting date through December 31st | \$                                 |          |
|   | <small>Enter your tax here</small> | \$       |
| <b>Flat Rate Business</b> (if Solicitor, specify dates _____ you will be in Clayton)  | \$                                 |          |
|   | <small>Enter your tax here</small> | \$       |
| <b>If UNITS,</b> enter type _____ and number of units _____   | \$                                 |          |
|   | <small>Enter your tax here</small> | \$       |
| <b>Business &amp; Commercial Property - Square Footage</b> _____  | \$                                 |          |
|   | <small>Enter your tax here</small> | \$       |
| <b>ONE TIME REGISTRATION FEE</b>  |                                    | \$ 56.00 |
| <b>TOTAL BUSINESS LICENSE TAX AND FEES</b>  |                                    | \$       |

**PAYMENT OF A BUSINESS LICENSE TAX DOES NOT RELIEVE THE APPLICANT (BUSINESS) OF THE REQUIREMENT TO COMPLY WITH OTHER REGULATIONS OF THE CITY, COUNTY, STATE OR FEDERAL GOVERNMENT. I DECLARE, UNDER PENALTY OF PERJURY, THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT. Note: ALL LICENSE STATEMENTS SUBJECT TO AUDIT BY CITY.**

**Date:** \_\_\_\_\_ **Signature of Owner or Representative:** \_\_\_\_\_

**Return application to above address and make check payable to CITY OF CLAYTON**

**LICENSE FEE SCHEDULE  
2011-2012**

**Gross Receipts-** Your business tax is based on estimated **gross receipts** you will receive from your sales or service **within the City of Clayton before paying your expenses**. If your Clayton based business conducts all business activities outside of Clayton, your business is still classified as an office and will be based on the estimated gross expenses at your office site/home office within the City of Clayton. This includes, but is not limited to: payroll, rent, utilities, supplies, etc.

|                  |                                      |             |                               |  |
|------------------|--------------------------------------|-------------|-------------------------------|--|
| <b>Option A)</b> | \$ 1 - \$ 30,000 = \$ 53.00          |             |                               |  |
|                  | \$ 30,001 - \$ 70,000 = \$ 53.00     | plus .10%   | for each \$1 over \$30,000    |  |
|                  | \$ 70,001 - \$ 100,000 = \$ 80.00    | plus .090%  | for each \$1 over \$70,000    |  |
|                  | \$ 100,001 - \$ 250,000 = \$167.00   | plus .075%  | for each \$1 over \$100,000   |  |
|                  | \$ 250,001 - \$ 350,000 = \$224.00   | plus .050%  | for each \$1 over \$250,000   |  |
|                  | \$ 350,001 - \$1,000,000 = \$463.00  | plus .025%  | for each \$1 over \$350,000   |  |
|                  | \$1,000,001 - \$5,000,000 = \$571.00 | plus .0175% | for each \$1 over \$1,000,000 |  |

**Option B)** Base Rate - \$149.87 plus \$40.77 for each employee (up to 300 employees)  
Plus \$20.91 for each employee (over 300 employees)

**Professional (i.e., Real Estate Agents, Brokers, Lawyers, Consultants, Doctors)** - There are three options:

**Flat Fee** Pay flat fee: Professional \$289.60; Associate \$119.19; Employee \$27.18 - No need to document transactions/money earned in Clayton; or

- Document gross receipts **earned within the City of Clayton** and pay according to the above "Gross Receipts" fee schedule up to applicable Professional flat fee(s) listed above. (i.e., \$20,000 of gross receipts = \$53 license fee). Must supply documentation and computations supporting your apportionment calculations; or
- Determine the percentage of your income **earned within the City of Clayton** and pay that % against the base rate in #1 above. (i.e., \$100,000 gross income; \$20,000 of that earned in Clayton equals 20% of your total income derived from Clayton: \$250 x 20% = \$50 license fee.) Must supply documentation and computations supporting your apportionment calculations. Maximum annual fee is the applicable Professional flat fee above.

**Vehicle Delivery in Clayton** - (After 4 deliveries.) There are three options:

**Flat Fee** Pay flat fee: First vehicle \$104.55; Each additional vehicle used in Clayton \$35.55 - No need to document transactions/money earned in Clayton; or

**Option 1.** Document gross receipts **earned within the City of Clayton** and pay according to the above "Gross Receipts" fee schedule up to applicable Vehicle flat fee listed above. (i.e., \$20,000 of gross receipts = \$53 license fee). Must supply documentation and computations supporting your apportionment calculations; or

**Option 2.** Determine the percentage of your income **earned within the City of Clayton** and pay that % against the base rate in #1 above. (i.e., \$100,000 gross income; \$20,000 of that earned in Clayton equals 20% of your total income derived from Clayton: \$90 x 20% = \$18 license fee.) Must supply documentation and computations supporting your apportionment calculations. Maximum annual fee is the applicable Vehicle flat fee listed above.

**Residential Rental Units** - For four or more rental units within the City of Clayton, a fee for each rental beyond three (3) units owned shall be paid as follows:

Per Single Family - \$173.55; Duplex & Multi-Family - \$173.55 with each additional unit - \$35.55

**Commercial Rental Property** -

Business & Commercial Property - 0.0543 per square foot or \$173.55 for each separate business operated on the premises; whichever is greater.

**Contractors (Construction, Landscape, etc.), Subcontractors, Land Developers and Builders.** Your business tax is based on your **gross receipts** you will receive from your service **within the City of Clayton before paying your expenses**.

|  |   |                               |
|--|---|-------------------------------|
| <b>Gross Receipts under \$150,000:</b> | <b>\$ 87.00 Semi-Annual (Clayton based contractors must obtain annual license.)</b> |                               |
|  | <b>\$150.00 Annual</b>  |                               |
| \$ 150,000 - \$ 250,000                | \$ 150 plus .0375%  | for each \$1 over \$150,000   |
| \$ 250,001 - \$ 350,000                | \$ 232 plus .025%   | for each \$1 over \$250,000   |
| \$ 350,001 - \$ 1,000,000              | \$ 286 plus .0125%  | for each \$1 over \$350,000   |
| \$1,000,001 - \$ 5,000,000             | \$ 459 plus .0087%  | for each \$1 over \$1,000,000 |
| \$5,000,001 - \$ 7,000,000             | \$1,208 plus .0065%   | for each \$1 over \$5,000,000 |