



City of San Dimas Business License Information

Thank you for your inquiry regarding business licensing in the City of San Dimas.

When conducting business in the City of San Dimas, Section 5.04 of the San Dimas Municipal Code requires businesses to obtain a business license.

Before you apply for your City of San Dimas business license:

- Contact the City for a copy of the business license application
 - Visit the City Website @ www.cityofsandimas.com
 - On the left side banner, Point to Administration, and “click on” Business License. Applications forms and rate schedules are available to print.
 - Business license applications are available at the City Hall reception counter at 245 E. Bonita Avenue
 - Applications can be mailed to you upon request, call City Hall @ (909) 394-6200
- Contact the Planning Department regarding the zoning requirement for your type of business and its location in the City.
- Contact the Building & Safety Department regarding tenant improvements and requirement for building permits for your location.
- In addition to obtaining your City business license, you are also required to comply with all City, County and State regulations for zoning, building, health & safety.
 - Your business activity may require a *Seller’s Permit* (Retail Sales Tax Number) from the State Board of Equalization. To obtain such a permit, you must contact one of the local district offices.
 - State Board of Equalization, 1521 W. Cameron, #300, West Covina, CA, (626) 480-7200
 - www.boe.ca.gov
 - Contact the *Internal Revenue Service* @ (800) 829-1040 for a Federal Employer Identification Number. The IRS will provide information for new businesses and the necessary forms.
 - Contact the *Franchise Tax Board* if you intend to have employees or to obtain forms for estimating State Withholding Tax for yourself.
 - Call (800) 852-5711
 - www.ftb.ca.gov
 - Contact *Los Angeles County Registrar Recorders Office* for information and to obtain a fictitious business name or DBA (doing business as)
 - County of LA Registrar Recorders, 12400 E. Imperial Hwy, Norwalk, CA (800) 201-8999
 - [//regrec.co.la.ca.us](http://regrec.co.la.ca.us)

City of San Dimas Business Licensing Information:

Before you apply.....(continued)

- Contact *Los Angeles County Environmental Health* for a Public Health License/Permit for all food facilities. Any change of ownership will require a new application to be issued to the new owners. New construction of food establishments must have approvals from both the City Building & Safety Department and the City Planning Department before a permit is issued.
 - LA County Environmental Health, 1435 W. Covina Pkwy, West Covina, CA (626) 813-3380
 - www.lapublichealth.org
- Contact the State of California, Alcohol Beverage Control for obtaining *Liquor Licenses* for your business
 - Alcohol Beverage Control, 222 E Huntington Dr., Ste 114, Monrovia, CA (626) 256-3241
 - www.abc.ca.gov

For your businesses' additional safety, the City of San Dimas contracts with Los Angeles County for law enforcement and fire protection.

- Los Angeles County Sheriff's Department, San Dimas Station, 270 S. Walnut Avenue, San Dimas, CA (909) 450-2700
- Los Angeles County Fire Department,
 - Station #64, 164 S. Walnut Avenue, San Dimas, CA (909) 599-6727
 - Station #141, 1124 Puente Avenue, San Dimas, CA (909) 599-7117

Please note that due to the nature of your business, certain businesses, professions, trades or occupations as set forth in Chapter 5.28 of the San Dimas Municipal Code shall first obtain a special permit to operate such business within the city.

- **For businesses with a fixed place of business in the City of San Dimas**, the application must be returned in person by the owner, proprietor, officer of the corporation, or an authorized agent. An authorized agent must have a letter signed by the owner of the business.
- **If you are a contractor**, Your Contractor's License must be current and active and a Certificate of Insurance for Worker's Compensation Insurance or a Worker's Compensation Declaration is required.

For any additional questions regarding business licenses in the City of San Dimas, contact San Dimas City Hall at (909) 394-6200.



Zoning Clearance # _____

Business License # _____

Zoning Clearance / Business License Application

New Business Change of Address Change in Ownership

Business Name _____

Business Owner _____ Business Email _____

Business Address _____
(May not be a P.O. Box except for a Home Occupation)

City _____ State _____ Zipcode _____

Business Phone # (____) _____ Business Fax (____) _____

Are you sharing this location with another business? NO YES Name: _____

Billing Address _____

City _____ State _____ Zipcode _____

Please indicate business type: Retail Wholesale Manufacturing Service Office

Please check ownership type: Sole Partnership Corporation LLC

Description of business activity in detail: _____
(attach additional sheets if necessary) (if manufacturing, wholesale, import/export, or retail, please list products)

Federal Employer ID (FEIN) _____ State Employer ID (SEIN) _____

State Professional License # _____ Class _____ Expiration Date _____

State Contractor License # _____ Class _____ Expiration Date _____

Retail Sales # _____ Gross Receipts (Video & Vending Only) \$ _____ / yr

of Business Owners _____ # of Full-time Employees _____ # of Part-time Employees _____

Rental Units _____ # Billiard Tables/Bowling Lanes _____ # Mobile Home/Storage Spaces _____ # Beds _____

NOT PUBLIC INFORMATION Business Owner/CEO _____ NOT PUBLIC INFORMATION

Residential Address _____ City _____ State _____ Zipcode _____

Phone # (____) _____ Social Security # _____ Driver's License # _____

Business Partner/Owner: _____

Residential Address _____ City _____ State _____ Zipcode _____

Phone # (____) _____ Social Security # _____ Driver's License # _____

• I hereby certify under penalty of perjury that the information provided herein is true and correct to the best of my knowledge and ability.

Owner's signature _____ Date _____

♦ City of San Dimas ♦ 245 E. Bonita Avenue ♦ San Dimas, California 91773 ♦ (909) 394-6200 ♦ Fax (909) 394-6209 ♦

For Office Use Only

Classification: _____ Catagory _____ Bus. Group: _____ Loc: _____ Lic Copies _____

Workers Comp: Y N E Chg Penalty: Y N Rate Code: _____ #Units: _____

Basic Fee \$ _____ # EE \$ _____ NPDES \$ _____ SB1186 \$ **1.00** = **TOTAL DUE: \$** _____

Please answer yes or no to the following questions regarding your business activity:

- Does your business use any type of chemical in your business activity? **YES NO**
 Type of Chemicals _____
- Does your business activity include food preparation? **YES NO**
IF YES, list type: _____
- Will your operations include any processing, handling, storage or discharge of hazardous material, including chemicals and solvents? **YES NO**
IF YES, list types: _____
 How disposed? _____
- Will your business generate any hazardous waste at this site? **YES NO**
IF YES, list type: _____
 How disposed: _____
- Will you be discharging any waste other than domestic waste to the sewer system? **YES NO**
IF YES, list type: _____
- Will your business operation include any welding or cutting? **YES NO**
 Acetylene, Arc? _____
- Will there be storage of any type of bottled gases, or more than 5 gallons of flammable liquid of any type? **YES NO**
IF YES, list types: _____
- Will your business operation include spray painting? **YES NO**
- Will your operation including sanding, cutting or shaping of wood products producing combustible dust or fibers? **YES NO**
- Will there be storage of materials exceeding 12 feet in height or tire, plastic or flammable liquid storage over 6 feet in height? **YES NO**
- Will there be repairs of vehicles beyond the simple exchange of parts? **YES NO**
- Does your business currently have a Los Angeles County Industrial Waste Permit, and/or a State of California Storm Water Permit? **YES NO**
IF YES, to either, please enter permit numbers: Industrial Waste _____ Storm Water _____
- Will your business activity include the sale of food or beverages for off-site consumption or the storage of food or beverages? **YES NO**
IF YES, submit copy of Los Angeles County Health Department permit.
- Will your business serve alcoholic beverages? **YES NO**
IF YES, What type of ABC license? BEER WINE ALL ALCOHOL **(Submit copy of License)**
- Will there be entertainment including, but not limited to, live performances (includes band, disc jockey) dancing, other? **YES NO**
IF YES, list type: _____
 Live Entertainment requires an Entertainment Permit
- Will there be arcade machines/amusements devices? **IF YES**, How many? _____ **YES NO**
- Will there be any placement of new machinery, equipment or storage units outdoors or on the roof? **YES NO**
- Will the business operation include any work, use or storage conducted outside of a wholly enclosed building? **YES NO**
- Will you be doing any interior or exterior alterations or improvements to the building or grounds? **YES NO**
IF YES, please describe _____
- Is your business subject to any outside regulations and permits from any governmental agency? **YES NO**
IF YES, please describe _____
- Does your business activity generate 4 or more cubic yards of waste per week? **IF YES**, Complete attached survey **YES NO**

I, the undersigned, have read and answered the above questions truthfully and to the best of my ability. I understand that a site inspection may be necessary at the business location due to the nature of my business and that the issuance of a business license may be subject to the approval of other government agencies under contract with the City of San Dimas.

 Owner's Initial

For Office Use Only

Planning Dept. Approval _____	Public Works Dept. Approval _____
<input type="checkbox"/> Zoning _____	<input type="checkbox"/> Need clearance from LA County Industrial Waste
Bldg Dept. Approval _____	<input type="checkbox"/> SIC _____ NPDES Permit _____ SW1 _____ SW2
<input type="checkbox"/> Need permits for physical modifications to premises	
<input type="checkbox"/> Need clearance from LA County Fire Department\	
<input type="checkbox"/> Special Conditions _____	



Business License # _____

Business Name _____ Phone _____

Business Address _____

City _____ State _____ Zipcode _____

Workers Compensation Declaration
(Section 3711 of the Labor Code)

I hereby affirm, under penalty of perjury, one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation , as provided by Section 3700, for the duration of any business activities conducted for which this license issued.

I have and will maintain workers' compensation insurance, as required by Section 3700, for the duration of any business activities conducted for which this license is issued.

I certify that in the performance of any business activities for which this license is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and I agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with the provisions of Section 3700.

Applicants Signature

Applicants Name and Title (please print)

Date

(Warning: Failure to secure Workers' Compensation Coverage is unlawful, and shall subject an employer to criminal penalties and civil fines up to \$100,000, in addition to the cost of compensation, damages as provided for in Section 3706 of the Labor Code, interest and attorney's fees.)

Workers' Compensation Insurance Information

Company _____

Address _____

City _____ State _____ Zipcode _____

Policy Number _____

Expiration Date _____

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City of San Dimas
245 E. Bonita Avenue
San Dimas, California 91773
(909) 394-6200, FAX (909) 394-6209

Business License Fees
Effective 7/1/2019

C03 Businesses located in San Dimas	\$139.20 plus \$10.50 per employee/partner	+ \$4.00 (State fee)
C03 Businesses located Outside San Dimas	\$139.20 annual	+ \$4.00 (State fee)
C04 Apartments & Business Rentals	\$139.20 plus \$12.90 (for each unit over 2)	+ \$4.00 (State fee)
C06 Hotels, Motels, Hospitals & Retirement Care & Nursing Homes	\$93.10 plus \$9.80 per bed	+ \$4.00 (State fee)
C07 Movie/Commercial Filming	\$386.80 per day	+ \$4.00 (State fee)
C09 Solicitors	\$231.60 principle solicitor \$154.50 (each additional)	+ \$4.00 (State fee) + \$4.00 (State fee)
C12 Deliveries	\$116.00 per vehicle	+ \$4.00 (State fee)
F01 Contractors	\$146.90 annual	+ \$4.00 (State fee)
F05 Home Occupations	\$139.20 annual + \$20.00 (planning fee)	+ \$4.00 (State fee)
F06 Exempt / Non-Profit	\$ 1.00	+ \$4.00 (State fee)
G01 Gross Receipts Vending Machines Video Arcades	Variable Rates	+ \$4.00 (State fee)

Certain businesses, professions, trades and occupations, because of their nature and circumstances, shall have a different license fee than that set forth for general business licenses (SD 5.24.070)
Please contact the business license department for licensing procedures and fees.

*Ordinance No. 956 7/1/95
Resolution No. 19-28, 05/28/2019*

On October 11, 2017 Governor Brown signed into law SB-1379 which adds a state fee of \$4 on any applicant for a local business license or similar instrument or permit, or renewal thereof. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop educational resources for businesses in order to facilitate compliance with federal and state disability laws, as specified. Additional \$4.00 will be added at time of receipt.

Workers' Compensation (Section 3711 of the Labor Code):

Failure to secure Workers' Compensation coverage is unlawful and shall subject an employer to criminal penalties and civil fines up to \$100,000 in addition to the cost of compensation, damages as provided for in Section 3706 of the Labor Code, interest and attorney fees.

BUSINESS LICENSE REFERRAL PHONE NUMBERS

City of San Dimas, Business Licenses.....	909/394-6200
City of San Dimas, Planning Dept.....	909/394-6250
City of San Dimas, Building & Safety.....	909/394-6260
San Dimas Chamber of Commerce.....	909/592-3818
Alcohol Beverage Control.....	626/256-3241
222 E. Huntington Dr., Ste 114, Monrovia, CA www.abc.ca.gov	
Alcohol Tobacco Firearms.....	213/534-2450
350 S Figueroa St, Los Angeles, CA www.atf.treas.gov	
Child Care Information Service.....	626/449-8221
1460 E. Holt, Ste 130, Pomona, CA www.rnetwork.org	909/397-4740
Dept of Social Services/Community Care 1000 Corporate Center Dr., Monterey Park //cclid.ca.gov	323/981-3350
Consumer Affairs.....	800/344-9940
State of California, Department of www.dca.ca.gov	800/952-5210
Contractor's State License Board.....	800/321-2752
www.cslb.ca.gov	
Fictitious Business Name.....	800/201-8999
County of L.A. Registrar/Recorders 12400 E. Imperial Hwy, Norwalk, CA //regrec.co.la.ca.us	562/462-2177
Franchise Tax Board.....	800/852-5711
www.ftb.ca.gov	800/338-0505
Health Permit.....	626/813-3380
L.A. County Environmental Health 5050 Commerce Dr., Baldwin Park	
Cottage Food Permits.(Plan Check).....	626/430-5560 & 626/430-5400
Public Health	888-700-9995
www.lapublichealth.org	
Resale Number/Seller's Permit.....	626/480-7200
State Board of Equalization, 1521 W. Cameron, #300, West Covina www.boe.ca.gov	
Bureau of Automotive Repair.....	800/952-5210
www.bar.ca.gov	

City Council

CURTIS W. MORRIS, Mayor
JOHN EBINER, Mayor Pro Tem
DENNIS BERTONE
EMMETT BADAR
JEFF TEMPLEMAN

City Manager

BLAINE M. MICHAELIS

Assistant City Manager

Treasurer/City Clerk
KENNETH J. DURAN



**Assistant City Manager of
Community Development**
LAWRENCE STEVENS

Director of Public Works
KRISHNA PATEL

**Director of Parks
and Recreation**
THERESA BRUNS

City Attorney
MARK W. STERES

Dear New Business Owner,

The City of San Dimas would like to welcome you and your new business to the City and to thank you for choosing San Dimas as a location for you to do business!

This letter is to inform you of recent statewide regulations that have been passed that may affect your business. Please read the following information and review the brochure included with this letter.

With the passage of AB 341 it is now a statewide regulation that **ALL** commercial businesses that generate four (4) or more cubic yards of waste including Multifamily Complexes with five (5) or more units to utilize some form of a recycling program.

To be in compliance with this law, businesses and multifamily dwellings can take one or any combination of the following in order to reuse, recycle, compost or otherwise divert solid waste from disposal:

- Self-haul recyclable material for reclamation
- Subscribe to recycling service through the City's franchised hauler
- Arrange for pickup of recyclables from a third party recycler
- Subscribe to a recycling service that may include mixed waste processing that yields diversion results comparable to source separation.

The City makes every effort to keep businesses aware of this requirement and assist with its compliance. As a new or potentially new business to the City we ask that you complete the brief recycling questionnaire about the waste generation and recycling programs for your business. As mandated by AB 341 jurisdictions will report on progress implementing their commercial recycling programs, including outreach, education, and monitoring efforts, as part of the existing CalRecycle annual report process. This reporting will include the City's activities to educate businesses on the mandatory recycling requirements, as well as the efforts to track and monitor compliance with this state law. From time to time we may contact you to update our records of your recycling activities.

Thank you in advance for your cooperation for more information you may contact us at (909)-394-6210.

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Commercial and Multi-Family Recycling Questionnaire

Please take a moment to fill out the questionnaire regarding recycling programs and services with your business. Your participation will provide us with useful information to help improve and track recycling within our city.

Name of business and business license #: _____

Contact person: _____ Phone: _____

Address: _____ Email: _____

Number of weekly waste pick-ups: _____

List average weekly amount of waste generated by your business (cubic yards): _____

If your business currently recycles, what materials do you recycle? Check all that apply:

- Paper (cardboard, newspapers, officer paper, catalogs/phonebooks, mail/junk mail, etc.)
- Glass and/or CRV (beverage containers, jars, CA redemption value items, etc.)
- Plastics (containers, cartons, bags, sheet wrap, etc.)
- Metal containers (steel/tin cans, vegetable cans etc.)
- Metal (appliances, scrap metal)
- Electronic waste
- Clothing (textiles, rags, etc.)
- Wood (pallets and/or lumber)
- Automobile fluids
- Other: _____

Please indicate your current recycling programs. Check all that apply:

Self-Haul. List facility or location where materials are recycled including how often (i.e. number of times per week/month, etc.) they are taken. If materials are donated, please list the recipient: _____

Waste Management or other franchise hauler. Please list current services and/or programs. If applicable, list any customizations of your current service (i.e. only recycle paper): _____

Number of regular and mixed waste containers: _____ Number of recycling containers: _____

Third Party pick-up. Name of Hauler: _____ Number of scheduled picks-up per month/year: _____

Other. Please describe other forms used or use this space to provide additional information to the above questions:

If your business is currently not recycling, please fill out the following:

Check materials your business can recycle:

- Paper Plastics Metals Clothing/textiles Wood Fluids/oils Yard waste Other: _____

Please select reasons for not recycling (check all that apply):

- Cost
- Lack of recycling options
- Confidential data destruction
- Space or lack of recycling containers
- Business location
- Time constraints of separating materials
- Recycling materials yet to be targeted
- Lack of education or knowledge of recycling practices
- Other: _____

Thank you for your participation! Your feedback is greatly appreciated.