

City of Albany

1000 San Pablo Avenue | Albany, California 94706 (510) 528-5730 | AccountsReceivable@AlbanyCA.org | www.albanyca.org

BUSINESS LICENSE APPLICATION FORM

STATE AND LOCAL LAW REQUIRE THE FOLLOWING INFORMATION:

A. Business Name		В.	NAICS Code:		
C. Business Description					
D. Physical Address of Business					
City					
E. Mailing Address of Business					
City	_ State_		Zip		
Phone	Email				
F. Ownership Type: Sole Proprietorship Partne	ership	Corporation	LLC/LLP	Other	
G. Federal Employer ID Number		OR Social Security	Number		
H. Owner's Name					
I. Owner's Mailing Address					
City					
Phone	Email				
J. Date Business commenced in Albany		K. Will this be a Ho	me-Based Busines	ss?	No
L. Number of Full Time Equivalent Workers/Employee	es OR Li	ving Units in Albany	:		
M. Contractor Information (If applicable):					
State Contractor's License Number	<u></u>				
	12 moi	nths			
N. Fire Fee Verification (for in town businesses):			_		
Inspected by			Date		
Initial Inspection Fee \$		Fire Units	 		
Emergency Contact(s) (for Fire Emergencies only):					
Name		Phone Number			
Name		Phone Number			
O. By signing this form, I certify that all the information	on provid	led above is true:			
Signature			Date		

City of Albany Business License Application Instructions

Read all instructions carefully prior to completing your application.

This application is for businesses new to Albany. If you hold, or previously held, an Albany business license and have a Business Account Number, please complete the City of Albany Business License Reinstatement Form. Contact the Finance Department if you do not remember your Account Number.

Line Item Instructions

- **A.** Business Name. Provide the name the business will operate under in the City.
- **B. NAICS Code.** Provide the NAICS code that the entity uses (or will use) with the federal government. More information on NAICS codes can be found online at https://www.census.gov/naics/.
- C. Business Description. Describe the type of product or service performed by the business.
- **D.** Physical Address. Provide the physical Albany location of the business this application is for.
- E. Mailing Address and Contact Information. Provide the address renewal bills and other correspondence should be sent.
- F. Ownership Type. Enter the type of ownership structure the business is operating under.
- G. FEIN or SSN. Enter the Federal Entity Identification Number or Social Security Number the business is operating under.
- H. Owner's Name. Enter the name of the legal owner of the business.
- Owner's Contact Information. If different from the business contact information, enter the contact information for the legal owner of
 the business.
- J. Date Business Commenced. Enter the date the entity began doing business within the City of Albany. A business license must be secured within 15 days of starting the business or late and penalty fees and interest will apply per Albany Municipal Code § 5-2.10.
- **K. Will this be a home-based occupation?** The following activities are considered Home Occupations (these are examples and not an all-inclusive list):

If you work and have an office in your Albany home;

If you make or receive business related telephone calls at your Albany home;

If your Albany home address is the mailing address for a business;

If you have a wholesaler's or merchant's license with an Albany address; or

If you make crafts at your Albany home that are sold at craft shows or swap meets.

- L. Number of full-time equivalent employees working in, or living units located in, Albany. *Employee count*: If you will have part-time staff, complete Worksheet A to determine the number of full-time equivalent employees working in Albany. *Living Unit count*: If you are renting out units that provide complete independent living facilities, list the number of units you are holding out for rent within the City of Albany.
- **M.** Contractor Information. Complete this section only if you are a Contractor with no fixed location within the City of Albany. Provide your license number and indicate how long the license should be issued for.
- N. Fire Unit Verification. Businesses with in town locations are subject to a fire prevention and life safety program fee. To verify the number of fire units for your business, you must contact the Fire Department and have a Fire Marshal sign off on the accuracy of the information. Contact the Fire Marshal's Office at (510) 528-5775 to make an appointment, or drop the application off at the Fire Department. Make sure to include your contact information in Section D so a Fire Marshal can contact you when the verification is completed. If an inspection of the site is needed, the Fire Department's sign off may take 7-10 business days.

Also include emergency contact information in case the Fire Department needs to contact someone to enter the business outside of normal business hours. This may be the owner's information, or the name and phone number for a property management company in charge of the property. This information is kept solely by the Fire Department for emergency purposes. If you have questions, contact the Fire Department at (510) 528-5770.

BUSINESS LICENSE RENEWAL NOTICE FOR IN TOWN BUSINESSES:

YOUR CITY OF ALBANY BUSINESS LICENSE WILL EXPIRE ON DECEMBER 31ST.

THE LICENSE PERIOD BEGINS JANUARY 1ST OF EACH YEAR. **LICENSES MUST BE RENEWED AND PAYMENT RE- CEIVED BY JANUARY 31ST OR PENALTIES AND INTEREST WILL ACCRUE.** While every effort is made to inform businesses of their renewal amounts, per Albany Municipal Code § 5-2.10(c), the City is not required to send a renewal notice or other bill. It is the business's responsibility to determine the correct amount due and pay any taxes owed by January 31st of each year.

FOR CONTRACTORS:

YOUR CITY OF ALBANY BUSINESS LICENSE WILL EXPIRE ON THE DATE SHOWN ON LICENSE.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL (510) 528-5730 OR EMAIL ACCOUNTSRECEIVABLE@ALBANYCA.ORG.

†Under federal and state law, compliance with disability access laws 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 at the following agencies: