



4381 Broadway, Suite 201, American Canyon, CA 94503 Attn:

Business License Coordinator
(707) 647-4354 • businesslicense@americancanyon.gov
www.americancanyon.gov

BUSINESS LICENSE APPLICATION

Please Check All That Apply

- ☐ Manufacturing
☐ Retail
☐ Wholesale
☐ Professional Services
☐ Other _____

Business Name _____

Business Location _____
(Cannot be a P.O. Box per State of California Business & Professions Code-Section 17538.5)

City _____ State _____ Zip _____

Mailing Address
(If Different) _____

City _____ State _____ Zip _____

Bus. Phone _____

Mobile Phone _____

E-Mail Address _____

Description of Business _____

Ownership ☐ Corporation ☐ Corp-Ltd Liability ☐ Partnership ☐ Sole Proprietor ☐ Trust

Bus. Start Date _____

Hours Open _____ Days Open _____

of Employees - F/T _____ P/T _____

CA Sellers Permit (if applicable) _____

FEIN _____

SIC Code # _____

Napa County Health Permit # _____
(If food or alcohol sales are involved)

Expiration Date _____

Website: _____

**All applications are required to have a FEIN/ITIN or SSN
Sole Proprietors may use a CA ID or DL**

Enter below names of Owners, Partners, Corporate Officers, Manager or Representative – *This name/names will print on license certificate*

1st Owner Name _____

Title _____

Date of Birth _____

Home Address _____
(Cannot be a P.O. Box)

Driver Lic. No. _____

Cell Phone No. _____

SSN/ITIN _____

2nd Owner Name _____

Title _____

Date of Birth _____

Home Address _____
(Cannot be a P.O. Box)

Driver Lic. No. _____

Cell Phone No. _____

SSN/ITIN _____

SERVICE OF PROCESS ADDRESS PURSUANT TO AB2184 – THIS ADDRESS WILL APPEAR ON YOUR CERTIFICATE IN LIEU OF THE BUSINESS LOCATION ADDRESS

If you wish to protect your residential address with a different service of process address use this section

NOTE – if your service of process address is a post office box or private mailbox it must comply with Section 17538.5 of the California Business & Professions Code

Service of Process Address _____

Residential Address to protect

☐ Business Location

☐ Mailing Address

☐ Owner/Partner/Officer Address

EMERGENCY CONTACT

Contact Name _____

Phone No. _____

STATE LICENSES

If your business is a regulated industry with storm water discharge requirements by NPDES Permit Program Provide your SIC Code and Permit Number

SIC CODE _____ NPDES PERMIT No. _____

If the business is licensed by a state entity please provide the license number and classification

State License No. _____ Classification _____ Expiration Date _____

☐ CONTRACTORS STATE LICENSE BOARD ☐ COSMETOLOGY ☐ DEPT OF CONSUMER AFFAIRS ☐ OTHER – SPECIFY _____

PLEASE COMPLETE THE FOLLOWING:

Est. Annual Gross Receipts \$ _____ Class Table _____

Flat Fee Type(s): _____

Application Fee \$25 plus \$4 State Mandated CASp Fee (Non-Refundable)

PLEASE MAKE CHECK PAYABLE TO CITY OF AMERICAN CANYON TOTAL AMOUNT DUE

\$
\$
\$ 29.00
\$

Thank you for doing business in the City of American Canyon

I hereby certify under penalty of perjury that the information submitted above is accurate and true, to the best of my knowledge.

Signature of Owner or Representative _____

Date _____

Print Name: _____ Best Contact Number for Application Questions: _____

CITY USE ONLY

Bus. Lic. No. _____

Date Issued _____ Issued By _____

A.P.N. _____ Zone _____

☐ Permitted Use ☐ Non-Permitted Use

☐ Requires C.U.P. C.U.P. # _____

H.O.P. # _____

☐ Existing Business Change of Ownership

☐ Existing Business Change of Address

☐ Exempt ☐ Tax Exempt ☐ District Only

Payment:

☐ Cash ☐ Ck No _____ ☐ CC Last 4 _____

Date Fees Paid _____

Receipt No. _____

7/2021 NM

CITY OF AMERICAN CANYON

Business License Fee Schedule

Gross Receipts Range	Class A	Class B	Class C
0 - 10,000	0	0	0
10,001 - 25,000	20	24	28
25,001 - 50,000	25	30	36
50,001 - 100,000	30	36	43
100,001 - 250,000	46	55	66
250,001 - 500,000	76	90	108
500,001 - 750,000	114	135	162
750,001 - 1,000,000	150	180	216
1,000,001 - 2,000,000	400	500	600
2,000,001 - 3,000,000	500	625	750
3,000,001 - 4,000,000	600	750	900
4,000,001 - 5,000,000	700	875	1,050
5,000,001 - 10,000,000	1,000	1,250	1,500
10,000,001 - and up	1,500	1,875	2,250

Class A

Automobile repair and services
Laundry, dry cleaning and garment services
Manufacturing
Retail Trade
Wholesale Trade

Class B

Amusement & Recreation Services
(including motion pictures)
Architectural Services
Automotive Sales
Barbers and Hairstylists
Beauty Shops
Engineering Services
Landscaping & Horticultural Services
Operators, renters, lessors of commercial property
Services to buildings - Hotels & Motels

All other persons engaged in business not specifically listed elsewhere.

Class C

Accounting and Bookkeeping Services
Insurance Brokers and Services
Management & Public Relations Services
Real Estate Agents, Brokers, & Managers
Financial Services
Legal Services
Medical & Health Services

FLAT RATES

Category	Rate
Transportation Services	
Vehicle up to 1/2 ton	15.00 per vehicle
1/2 ton to 2 ton	25.00 per vehicle
2 ton to 3 ton	50.00 per vehicle
Over 3 tons	75.00 per vehicle
Advertising Billboards	100.00 per sign
Distributing Handbills	100/yr 50/mo 25/day
Auctioneers	250/yr 25/day
Carnivals, fairs	200 + 150/day
Over 10 concessions	30 + 20/day
Circuses	200/day
Contractors (Primary CSLB Class A or B)	100/full yr 50/6 mos.
Special Contractors (Primary CSLB Class C or D)	50/full yr 25/6 mos.
Sound Trucks, per truck	200/yr or 50/day
Klieg Lights, per light	150/yr or 15/day
Apartments, residential rentals, 4 or more units	12/unit
Mobile Home, Trailer or RV park	12/space
Sales Representatives	25/yr
Peddlers & Solicitors, Principal	200/yr
Each additional peddler	10/qtr
Taxicab Operators	60 + 25/vehicle
Card Tables	150/table
Additional Branch or type of Business	3.00 each

Initial Applicants are required to estimate their Gross Receipts. Renewals will be calculated on actual prior year Gross Receipts information.

For businesses not listed above, please call the
Business License Coordinator at (707) 647-4354

NON REFUNDABLE FEES

BUSINESS LICENSE APPLICATION FEE \$25.00

HOME OCCUPATION PERMIT FEE (All Applications of a residential address in American Canyon) \$72.00

ZONING CLEARANCE FEE (Applicants of Commercial/Industrial Locations in American Canyon Only) \$72.00

CASp Fee (STATE MANDATED) \$4.00

Your business may be subject to additional permit requirements/fees

Thank you for doing business in the City of American Canyon