



City of Sierra Madre  
**Administration Services Department**  
 232 W. Sierra Madre Blvd., Sierra Madre, CA 91024  
 (626) 355 - 7135  
 www.cityofsierramadre.com  
**BUSINESS LICENSE APPLICATION**

OFFICE USE ONLY  
 \_\_\_\_\_  
 LICENSE NUMBER

PRINT CLEARLY. ILLEGIBLE APPLICATIONS WILL BE RETURNED. APPLICATIONS MAY TAKE UP TO 2 WEEKS TO BE PROCESSED

- \*1. Business Name \_\_\_\_\_
- \*2. Business Address \_\_\_\_\_ Suite \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_
- \*3. Business Phone ( ) \_\_\_\_\_
- \*4. Mailing Address \_\_\_\_\_ Suite \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_
- 5. Email Address \_\_\_\_\_ 6. Website Address \_\_\_\_\_
- \*7. Start Date in Sierra Madre \_\_\_\_\_ \*8. Business Activity \_\_\_\_\_
- \*9. Product Sold \_\_\_\_\_
- \*10. State License (Contractor, Real Estate, Medical, Etc.) \_\_\_\_\_  
 No. \_\_\_\_\_ Type \_\_\_\_\_ Exp. \_\_\_/\_\_\_
- 11. Seller's Permit Number \_\_\_\_\_
- \*12. Type of Ownership (check one)  
 Sole Proprietorship    Limited Liability Company (LLC)  
 Partnership    Corporation   Tax ID No. \_\_\_\_\_
- \*13. Owner or Principal Information *If necessary, please attach a list of additional principals*  
 The first name listed will appear on the business license. One of these contacts should be an emergency contact  
 Name \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Cell: ( ) \_\_\_\_\_  
 Name \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

*14. My business is located <u>outside the City of Sierra Madre</u> <input type="checkbox"/> My business is located at a <u>residential location</u> in the City <input type="checkbox"/> My business is located at a <u>commercial location</u> in the City <input type="checkbox"/>	*15. No. of Full Time Employees _____ No. of Part Time Employees _____ No. of Vehicles _____ <small>Attach copy of plate numbers</small>
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I certify that the above information is correct to the best of my knowledge. I understand that a business license is required to do business in Sierra Madre under Chapter 5.04 of the Sierra Madre Municipal Code. I further understand that information on this application may be shared with other city departments and state agencies such as the EDD, BOE, FTB, etc.

Signature \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY			
Date Received _____	Date Entered _____	Planning Review _____	Police Review _____
License Type _____	Class Code _____	Total Fee _____	