



# BUSINESS LICENSE APPLICATION

**CITY OF IMPERIAL**  
**Finance Department**  
420 South Imperial Avenue  
Imperial, CA 92251  
Phone (760)355-3050  
Fax (760) 355-4718  
[dquintana@cityofimperial.org](mailto:dquintana@cityofimperial.org)

## INSTRUCTIONS

1. If you are applying for a Business License, please complete the attached Business License application. **DO NOT LEAVE ANY BLANKS.**
2. All businesses must show proof of Workman's Compensation Insurance. Please attach a copy of your latest policy to this form. If you do not have any employees, please complete and sign the Workman's Compensation Declaration portion of the application.
3. Businesses may also be obligated to submit proof of liability insurance.
4. Sales or use tax may apply to your business activities. You may seek written advice regarding the application of tax to your particular business by writing to the nearest CA Department of Tax and Fee Administration office. For general information, please call the CA Department of Tax and Fee Administration at (800) 400-7115. You may also contact the local office of the CA Department of Tax and Fee Administration at (760) 352-3431.
5. All businesses must obtain a fire inspection clearance from the Imperial County Fire Department. The Imperial County Fire Department can be reached at (442) 265-3021, between 8:00 a.m. to 5:00 p.m. Monday through Friday.
6. All businesses operating out of a residence are subject to a one-time home occupancy fee of \$60.00, payable upon initial receipt of a business license.
7. On January 1, 2018 Governor Brown signed into law SB-1186 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.

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:

- The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx)
- The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov)
- The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov)

Imperial City Code Chapter 12, section 12-1 states- "It shall be unlawful for any person to commence, conduct or carry on, within the City of Imperial, any business, occupation, show, exhibition or game without first procuring a license to do so".

Please note that if you are no longer conducting business in the City of Imperial, you will need to state that in writing.

## DISABILITY ACCESS REQUIREMENTS AND RESOURCES

### NOTICE TO APPLICANTS FOR BUSINESS LICENSES AND COMMERCIAL BUILDING PERMITS:

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:

DEPARTMENT OF  
GENERALSERVICES,  
Division of the State  
Architect, CASp Program

[www.dgs.ca.gov/dsa](http://www.dgs.ca.gov/dsa)  
[www.dgs.ca.gov/casp](http://www.dgs.ca.gov/casp)

DEPARTMENT OF  
REHABILITATION  
Disability Access Services

[www.dor.ca.gov](http://www.dor.ca.gov)  
[www.rehab.cahwnet.gov/  
disabilityaccessinfo](http://www.rehab.cahwnet.gov/disabilityaccessinfo)

DEPARTMENT OF  
GENERALSERVICES,  
California Commission on  
Disability Access

[www.cdda.ca.gov](http://www.cdda.ca.gov)  
[www.cdda.ca.gov/resour  
ces-menu/](http://www.cdda.ca.gov/resources-menu/)

### CERTIFIED ACCESS SPECIALIST INSPECTION SERVICES

Compliance with state and federal construction-related accessibility standards ensures that public places are accessible and available to individuals with disabilities. Whether your business is moving into a newly constructed facility or you are planning an alteration to your current facility, by engaging the services of a Certified Access Specialist (CASp) early in this process you will benefit from the advantages of compliance and under the Construction-Related Accessibility Standards Compliance Act (CRASCA, Civil Code 55.51-55.545), also benefit from legal protections.

Although your new facility may have already been permitted and approved by the building department, it is important to obtain CASp inspection services after your move-in because unintended access barriers and violations can be created, for example, placing your furniture and equipment in areas required to be maintained clear of obstructions. For planned alterations, a CASp can provide plan review of your improvement plans and an access compliance evaluation of the public accommodation areas of your facility that may not be part of the alteration.

A CASp is a professional who has been certified by the State of California to have specialized knowledge regarding the applicability of accessibility standards. CASp inspection reports prepared according to CRASCA entitle business and facility owners to specific legal benefits, in the event that a construction-related accessibility claim is filed against them.

To find a CASp, visit [www.apps2.dgs.ca.gov/DSA/casp/casp\\_certified\\_list.aspx](http://www.apps2.dgs.ca.gov/DSA/casp/casp_certified_list.aspx).

## DISABILITY ACCESS REQUIREMENTS AND RESOURCES

### GOVERNMENT TAX CREDITS, TAX DEDUCTIONS AND FINANCING

State and federal programs to assist businesses with access compliance and access expenditures are available:

#### Disabled Access Credit for Eligible Small Businesses

FEDERAL TAX CREDIT—Internal Revenue Code Section 44 provides a federal tax credit for small businesses that incur expenditures for the purpose of providing access to persons with disabilities. For more information, refer to Internal Revenue Service (IRS) Form 8826: Disabled Access Credit at [www.irs.gov](http://www.irs.gov).

STATE TAX CREDIT—Revenue and Taxation Code Sections 17053.42 and 23642 provide a state tax credit similar to the federal Disabled Access Credit, with exceptions. For more information, refer to Franchise Tax Board (FTB) Form 3548: Disabled Access Credit for Eligible Small Businesses at [www.ftb.ca.gov](http://www.ftb.ca.gov).

#### Architectural and Transportation Barrier Removal Deduction

FEDERAL TAX DEDUCTION—Internal Revenue Code Section 190 allows businesses of all sizes to claim an annual deduction for qualified expenses incurred to remove physical, structural and transportation barriers for persons with disabilities. For more information, refer to IRS Publication 535: Business Expenses at [www.irs.gov](http://www.irs.gov).

#### California Capital Access Financing Program

STATE FINANCE OPTION—The California Capital Access Program (CalCAP) Americans with Disabilities Act (CalCAP/ADA) financing program assists small businesses with financing the costs to alter or retrofit existing small business facilities to comply with the requirements of the federal ADA. Learn more at [www.treasurer.ca.gov/cpcfca/calcap/](http://www.treasurer.ca.gov/cpcfca/calcap/).

### FEDERAL AND STATE LEGAL REQUIREMENTS ON ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

AMERICANS WITH DISABILITIES ACT OF 1990 (ADA) —The ADA is a federal civil rights law that prohibits discrimination against individuals with disabilities, and requires all public accommodations and commercial facilities to be accessible to individuals with disabilities. Learn more at [www.ada.gov](http://www.ada.gov).

CALIFORNIA BUILDING CODE (CBC)—The CBC contains the construction-related accessibility provisions that are the standards for compliant construction. A facility's compliance is based on the version of the CBC in place at the time of construction or alteration. Learn more at [www.bsc.ca.gov](http://www.bsc.ca.gov).



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Please Check All that Apply:	<input type="checkbox"/> Commercial Business	<input type="checkbox"/> Home Occupation	<input type="checkbox"/> Independent Contractor
	<input type="checkbox"/> New Business	<input type="checkbox"/> Change of Owner	<input type="checkbox"/> Change of Address

Business Name: \_\_\_\_\_

Business Address (location): \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_  
Business Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ E-mail: \_\_\_\_\_  
\_\_\_\_\_

Business Description: \_\_\_\_\_

Ownership:  Single Ownership  Corporation  Partnership Business Since \_\_\_\_\_  
Contractors License No: \_\_\_\_\_ Exp: \_\_\_\_\_ State Board Resale No \_\_\_\_\_  
Federal Tax I.D. No: \_\_\_\_\_

**ENTER BELOW THE NAMES OF OWNERS, PARTNERS, OR CORPORATE OFFICERS**

Owner Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Cell: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_ Drivers Lic: \_\_\_\_\_ ST. \_\_\_\_\_

Owner Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Cell: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_ Drivers Lic: \_\_\_\_\_ ST. \_\_\_\_\_

Owner Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Cell: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_ Drivers Lic: \_\_\_\_\_ ST. \_\_\_\_\_

*"Disclosure of owner's social security number is mandatory, as permitted under 42 USCS section 405 (c)(2)(c)(i) of the privacy act"*

**IN CASE OF EMERGENCY, PLEASE CONTACT:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell: \_\_\_\_\_

**APPLICANTS FOR HOME OCCUPATIONS MUST COMPLETE THE FOLLOWING: HOME OCCUPATIONS MUST CONFORM WITH THE RULES AND REGULATIONS OF SECTION 24.11.200 OF THE CITY OF IMPERIAL ZONING CODE. A HOME OCCUPATION IS A BUSINESS ACTIVITY CONDUCTED AS AN ACCESSORY USE IN A RESIDENTIAL DWELLING FOR THE PURPOSE OF PROFIT.**

Number of occupants residing in the dwelling to be involved in the business: \_\_\_\_\_

Describe mechanical/electrical equipment necessary to conduct business: \_\_\_\_\_

Material of products used and their manner of delivery to the business: \_\_\_\_\_

How are contacts made with clients and/or employees not authorized on the premises? \_\_\_\_\_

**WORKER'S COMPENSATION DECLARATION**

\_\_ 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 Worker's Compensation Laws of California, and agree that if I should become subject to the Worker's Compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with the provisions of Section 3700.

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

\_\_ I have and will maintain Worker's Compensation insurance as required by Section 3700, for the duration of any business activities conducted for which this license is issued.

Carrier: \_\_\_\_\_ Policy#: \_\_\_\_\_

***I declare under penalty of perjury that the information contained in this application is true and correct to the best of my knowledge and belief.***

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

\_\_ Approve    \_ Deny Remarks    Utility Account #                      Water, Sewer, Trash, AB939

Date: \_\_\_\_\_ Finance Department \_\_\_\_\_

\_\_ Approve    \_ Deny Remarks \_\_\_\_\_

Date: \_\_\_\_\_ Fire Department \_\_\_\_\_

\_\_ Approve    \_ Deny Remarks \_\_\_\_\_

Date: \_\_\_\_\_ Chief of Police \_\_\_\_\_

\_\_ Approve    \_ Deny Remarks    Areas Zoned As: \_\_\_\_\_

Date: \_\_\_\_\_ Community Development \_\_\_\_\_

\_\_ Approve    \_ Deny Remarks \_\_\_\_\_

Date: \_\_\_\_\_ City Clerk \_\_\_\_\_

\_\_ Approve    \_ Deny Remarks \_\_\_\_\_

Date: \_\_\_\_\_ Public Services    Back Flow Device #                      Required / Exempt

\_\_ Approve    \_ Deny Remarks \_\_\_\_\_

Date: \_\_\_\_\_ City Manager \_\_\_\_\_



All home business must comply with Imperial Zoning Code Section 24.11.200, which states that following:

- A. Home occupations may be permitted only when in compliance with the conditions listed herein. A business license must be issued prior to operation of such use. The fee shall be in accordance with those adopted by City Council resolution.

There shall be no stock-in-trade other than products used in the home occupation.

- \_\_\_\_\_ 1. A home occupation shall be conducted entirely within a dwelling, if in an attached or a detached garage; it shall not impede the use of said garage for vehicle storage.
- \_\_\_\_\_ 2. No exterior alterations of the dwellings shall be made which would change the residential character of the home to accommodate the Home Occupation.
- \_\_\_\_\_ 3. Electrical or mechanical equipment which creates visible or audible interference in radio or television receivers or causes fluctuations in line voltage outside the dwelling unit shall be prohibited.
- \_\_\_\_\_ 4. Only the residents of the dwelling unit may be engaged in the Home Occupation.
- \_\_\_\_\_ 5. The establishment and conduct of a Home Occupation shall not change the principal character or use of the dwelling unit involved.
- \_\_\_\_\_ 6. There shall be no signs other than those permitted by this ordinance.
- \_\_\_\_\_ 7. The required residential off-street parking shall be maintained.
- \_\_\_\_\_ 8. A Home Occupation shall not create vehicular or pedestrian traffic in excess of that which is normal for the zone in which it is located.
- \_\_\_\_\_ 9. No vehicles or trailers (including pick-up trucks and vans) or construction or other equipment, except those normally incidental to residential use, shall be kept on the site.

***I have read and understand the above information and will comply. I further understand that any violation of the Code will result in my license being suspended and/or revoked:***

Date: \_\_\_\_\_

Signature: \_\_\_\_\_