



IN BREA-BUSINESS COUNTS!

CITY OF BREA

BUSINESS LICENSE TAX APPLICATION



Please complete this application then call for FEE due.

Submit completed application along with payment to:

City of Brea, Business License Division,
1 Civic Center Cir., Brea, CA 92821
(714) 990-7686 Fax (714) 671-4484
BusinessLicenseInfo@CityOfBrea.net

1. BUSINESS NAME START DATE (Brea, CA 92821)
2. BUSINESS ADDRESS BUSINESS PHONE
3. MAILING NAME AND ADDRESS (if different from business address) ANNUAL GROSS RECEIPTS NO. OF EMPLOYEES (Brea)
4. TYPE OF BUSINESS: State fully the exact nature of business to be conducted at or from the location shown on line 2 above.
5. FEDERAL EMPLOYER ID NO. STATE EMPLOYER ID NO. (EDD)
6. CALIFORNIA STATE CONTRACTOR'S LICENSE NO. & CLASSIFICATION (if applicable) CALIFORNIA SELLER'S PERMIT NO./ RESALE NO. (if applicable) CALIFORNIA STATE PROFESSIONAL LICENSE NO. (if applicable)

OWNER/OFFICER INFORMATION

7. Please check the type of ownership and complete information.

Ownership checkboxes: Sole Proprietorship, Partnership, Husband & Wife, Limited Liability, Corporation, Trust.
Form fields for Name, Title, Home Phone No, Home Address, City & State, Zip, SSN, DL # for Sole Proprietorship, Partnership, and Husband & Wife.

PAYMENT OF THIS TAX DOES NOT CONSTITUTE ZONING, BUILDING, OR FIRE CODE APPROVAL. CHECK WITH THE DEVELOPMENT SERVICES DEPARTMENT IN ORDER TO DETERMINE IF YOUR BUSINESS CAN BE LEGALLY ESTABLISHED AT YOUR LOCATION.

8. I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

Signature Print Name Title Date

FOR OFFICE USE ONLY

ACCOUNT NO. ORDINANCE CLASSIFICATION
EFFECTIVE DATES ISSUE DATES FEE
CERTIFICATE OF OCCUPANCY: YES NO

NOTES: