



# City of Rolling Hills Estates

4045 Palos Verdes Drive North  
Rolling Hills Estates, CA 90274  
310-377-1577 • Fax 310-377-4468  
www.RHE.city

This Application is for:

- New Business
- Renewal
- Change of Owner
- Change of Address

## Business License Application - Year 2017

### Official Use Only

License No. \_\_\_\_\_  
 License Fee \$: \_\_\_\_\_  
 Amt. Remitted: \_\_\_\_\_  
 Check # \_\_\_\_\_  
 AB 939 (3720) \$ \_\_\_\_\_  
 Date: \_\_\_\_\_

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

Business Address: \_\_\_\_\_  
Address Suite City State Zip

Mailing Address: \_\_\_\_\_  
(If Different) Address Suite City State Zip

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

Business Activity: \_\_\_\_\_ Email: \_\_\_\_\_

Ownership:  Sole Proprietor  Partnership  LLC  Corporation  Non-Profit

Federal ID No. \_\_\_\_\_ Social Security No. \_\_\_\_\_ Seller's Permit No. \_\_\_\_\_

State License (Contractor, Real Estate, etc): No. \_\_\_\_\_ Type: \_\_\_\_\_ Start Date In City \_\_\_\_\_

### Owner or Principal Information

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

Home Address: \_\_\_\_\_  
Address Suite City State Zip

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

Home Address: \_\_\_\_\_  
Address Suite City State Zip

I declare under penalty of making a false statement the information is true and correct to the best of my knowledge.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

- All Licenses Expire on the Thirty-First of December, and license renewals are due by January 31 to avoid penalty.

SB 1186 "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)."

### I. Are You (fee is non-proratable)

- Contractor \$40.00 \_\_\_\_\_
- Delivery \$100.00 \_\_\_\_\_
- Gardener \$100.00 \_\_\_\_\_
- Horse Trainer Permit \$450.00 \_\_\_\_\_
- Maintenance \$100.00 \_\_\_\_\_
- Performing Arts Theatre \$25.00 \_\_\_\_\_
- Seasonal Business \$100.00 \_\_\_\_\_

Penalty \_\_\_\_\_

Subtotal \_\_\_\_\_

**New License \$20 or  
Renewal \$10**

**SB 1186 State Mandated Fee 1.00**

**TOTAL**

Mailing Label

**II. Photography (fee is non-proratable)**

- |  |                              |
|--|------------------------------|
| A. Motion Picture Location Shooting in Areas is \$500 per day        | Days _____ x \$500 = _____   |
| B. Shooting in Commercial Area or Public Property is \$1,000 per day | Days _____ x \$1,000 = _____ |
| C. Still Photography on City Property is \$200 per day               | Days _____ x \$200 = _____   |
| D. Still Photography on Other Properties is \$100 per day            | Days _____ x \$100 = _____   |

**Enter New License \$20 or Renewal \$10** \_\_\_\_\_

**TOTAL** \_\_\_\_\_

**III. All Other Businesses - Please Select Your Category and Complete the Form.**

Gross receipts shall be based upon the gross receipts for the Previous Calendar Year or Estimate if new

<input type="checkbox"/>	<b>Retail &amp; Restaurant</b>	Base fee \$25 = _____	<b>Plus \$.25 per \$1,000 for all Gross Receipts in excess of \$25,000</b>
	<b>Enter Additional (if over \$25,000) =</b> _____		= Total Receipts (a) _____ less \$25,000 = (b) _____ (b) _____ divided by 1,000 = (c) _____ times .25 = _____
<input type="checkbox"/>	<b>Alarm Companies</b>	Base fee \$100 = _____	<b>Plus \$3.00 per \$1,000 for all Gross Receipts</b>
	<b>Enter Additional =</b> _____		= Total Receipts (a) _____ divided by 1,000 = (b) _____ times 3
<input type="checkbox"/>	<b>Landfills</b>	Base fee \$150 = _____	<b>Plus \$.50 per \$100 for all Gross Receipts in excess of \$30,000</b>
	<b>Enter Additional (if over \$30,000) =</b> _____		= Total Receipts (a) _____ less \$30,000 = (b) _____ (b) _____ divided by 100 = (c) _____ times .50 = _____
<input type="checkbox"/>	<b>Private School</b>	Base fee \$25 = _____	<b>Plus \$.60 per \$1,000 for Tuition Revenue</b>
	<b>Enter Additional =</b> _____		= Revenue (a) _____ divided by 1,000 = (b) _____ times .60
<input type="checkbox"/>	<b>Realtor</b>	Base fee \$150 = _____	<b>Plus \$15 per Employee plus Owners</b>
	<b>Enter Additional =</b> _____		= No. of Employees _____ times 15
<input type="checkbox"/>	<b>Ready Mix Plants</b>	Base fee \$500 = _____	<b>Plus \$2 per \$1,000 for all Gross Receipts in excess of \$250,000</b>
	<b>Enter Additional (if over \$250,000) =</b> _____		= Total Receipts (a) _____ less \$250,000 = (b) _____ (b) _____ divided by 1,000 = (c) _____ times .25 = _____
<input type="checkbox"/>	<b>Recreational Business</b>	Base fee \$25 = _____	<b>Plus \$3.00 per \$1,000 for all Gross Receipts</b>
	<b>Enter Additional =</b> _____		= Total Receipts (a) _____ divided by 1,000 = (b) _____ times 3
<input type="checkbox"/>	<b>Commercial Property Rental</b>	Fee \$25 = _____	<b>Plus \$4 per 1,000 ft<sup>2</sup> of all floor space in excess of 5,000 ft<sup>2</sup></b>
	<b>Enter Additional (if over 5,000 ft<sup>2</sup>) =</b> _____		= Floor Space (a) _____ less 5,000 = (b) _____ (b) _____ divided by 1,000 = (c) _____ times 4 = _____
<input type="checkbox"/>	<b>Vending Machines</b>	Base fee \$75 = _____	<b>Plus \$2 per \$1,000 for all Gross Receipts in excess of \$25,000</b>
	<b>Enter Additional (if over \$25,000) =</b> _____		= Total Receipts (a) _____ less \$25,000 = (b) _____ (b) _____ divided by 1,000 = (c) _____ times 2 = _____
<input type="checkbox"/>	<b>Wholesale</b>	Base fee \$25 = _____	<b>Plus \$.15 per \$1,000 for all Gross Receipts in excess of \$25,000</b>
	<b>Enter Additional (if over \$25,000) =</b> _____		= Total Receipts (a) _____ less \$25,000 = (b) _____ (b) _____ divided by 1,000 = (c) _____ times .15 = _____
<input type="checkbox"/>	<b>Professional/Semi</b>	Base fee \$150 = _____	<b>Plus \$15 per Employee plus Owners</b>
	<b>Enter Additional =</b> _____		= No. of Employees _____ times 15 (Include Owner, Partner, Family Members, etc.)
<input type="checkbox"/>	<b>Home Occupation</b>	Base fee \$25 = _____	
<input type="checkbox"/>	<b>Other*</b>		
	<b>Total from Above=</b>		<b>*Amusement Games</b> (game, alley, and/or device) add \$200 per game.
	<b>**Prorated Total =</b>		<b>*Juke Box</b> add \$25 for first machine & \$10 for each additional machine.
	<b>***Penalty =</b>		(*if applicable 100%, 75% or 50% of box Total Above)
	<b>Subtotal =</b>		
	<b>AB 939 (Subtotal x 10%) =</b>		<i>-Excluding Home Occ, Alarm Co or Vending Machines</i>
	<b>SB 1186 State Mandated Fee</b>	1.00	January 1, 2013, and continues until December 31, 2018
	<b>Enter New License \$20 or Renewal \$10 =</b>		<i>Required</i>
	<b>TOTAL</b>		(TOTAL=Subtotal + AB 939 + Permit + New or Renewal)

**\*\*Proration Schedule for New Business Starting after March 31 • April 1 to August 31 pay 75% • Sept 1 to Dec 31 pay 50%**

**\*\*\*Late Fee/Penalties:** Add a penalty of **10% of the license tax on the last day of each month** after the due date with a maximum annual penalty of 50% of the annual fee. Licenses are due and payable on the first day of doing business within the City for new businesses and **license renewals are due by January 31** each year to avoid penalty.