



# BUSINESS LICENSE APPLICATION

## CITY OF ORANGE

www.cityoforange.org

### CONTRACTORS ONLY

Business License  
300 E. Chapman Ave

Phone (714) 744-2270  
Fax (714) 288-2170

P.O. Box 11024  
Orange  
CA 92856-8124

PRINT IN BLACK OR BLUE INK ONLY

CITE NO.

ACCOUNT NO.

**INCOMPLETE APPLICATIONS WILL BE REJECTED**

<input type="checkbox"/> New Application	<input type="checkbox"/> Previous City of Orange Business License # _____
<input type="checkbox"/> Reactivating Business License	<input type="checkbox"/> Change of Address (\$10 Move Fee) Previous address _____
<input type="checkbox"/> Change to Existing Orange Business License	<input type="checkbox"/> Change of Name – Previous Name _____

1 Business Name or Db a
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2 Business Address (Do not use P.O. Box)
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3 City, State, Zip Code	4 <input type="checkbox"/> Home Based?
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5 Mailing Address (if different from above)
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6 Business Owner or Corporation Name	7 <input type="checkbox"/> Sole-Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____
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8 Business Phone	Business Fax	9 Social Security # (Sole Proprietor)	10 Federal Tax ID
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11 State License Number	Class(es)	Exp. Date	12 Starting Date of Job in Orange	13 # Employees:
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14 Description of Job or Business Activity in Orange
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15 General Contractor for this Job	16 Job Location in Orange	17 Value of Job \$
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18 E-mail	Website	19 Seller's Permit or Resale #
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20 Owner or President's Name	Title
Residential Address	Drivers Lic #
City, State, Zip Code	Cell or Home Phone
21 Emergency Contact - Name/Title	Phone

If based in a commercial location in Orange, please provide the following:

22 Property Owner:	Phone
Property Manager:	

23 Please answer the following:
1. Are you the General Contractor on this job?
2. Will you be using Subcontractors? See back of form about sending in your List of Subcontractors.
If your business is <u>based</u> in the City of Orange...
3. Are you sharing your location with another business?
4. Will you be storing hazardous materials?

I hereby certify under penalty of perjury that the above information is correct and I am an authorized representative of this business. I understand I must fulfill all requirements of the Orange Municipal Code in order to operate my business. I agree to conduct all phases of this business in conformance with all applicable laws, ordinances and regulations established for such business/profession. If a Home Based business, I agree to conform to O.M.C. 17.13.040(JJ). When I close/cease my business in Orange, I am required to submit a statement within 30 days, per O.M.C. 5.10.010, unless I have a Flat Tax Schedule.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

SEE TAX SCHEDULE ON REVERSE SIDE FOR AMOUNT DUE WITH APPLICATION

TAX SCHEDULE: _____ TYPE: _____ LINKED _____ VISA / MC / CASH / CK # _____ EXPIRATION DATE: _____
REMARKS: _____
TOTAL DUE: _____

## GENERAL CONTRACTORS

PROVIDE YOUR LIST OF SUBCONTRACTORS AS SOON AS POSSIBLE TO AVOID TAX LIABILITY

- You must send a list of your sub contractors or services for **each stage** of the project.
- Fax to (714) 288-2170 or email to: **blorange@cityoforange.org**.
- Failure to provide this list makes you liable for the business tax for each subcontractor or service.
- Call (714) 744-2270 for any questions.

O.M.C. 5.10.010 E. General contractors or contractors employing subcontractors or other services, whether the provider of said services is state licensed or not, shall furnish the Business Services Coordinator with the names and addresses of the subcontractors or other services and the amount of money which the contractor is paying or proposing to pay to each of his subcontractors or other services. **In addition to any other penalties provided by law, in the event the contractor fails, neglects or refuses to provide the Business Services Coordinator with such information on subcontractors, or other services, the contractor shall be jointly and severally liable to pay the amount of the business tax for each subcontractor or other services so employed.**

	CLASSIFICATION / TAX SCHEDULE	TAX	APPLICATION** & STATE FEES*	TOTAL DUE	ANNUAL RENEWAL
F8	CONTRACTORS (A or B Class) Flat Tax	\$125.00	\$80.00	<b>\$205.00</b>	\$170.00
F7	CONTRACTORS (without an A or B class) Flat Tax	\$75.00	\$80.00	<b>\$155.00</b>	\$120.00

- Make checks payable to: City of Orange
- Visa and MasterCard are accepted
- \*\*Application Fee (\$56.00) and \*State Fee (\$4.00) are non-refundable
- Gross Receipts Option: Call 714-744-2270 for more information
- Contractors State License Board (CSLB) - (800) 321-2752 [www.cslb.ca.gov](http://www.cslb.ca.gov)

### \*State Mandated Fee (\$4.00) for Disability Access & Education Revolving Fund:

On October 11, 2017, Governor Brown signed into law Assembly Bill 1379, increasing the State Mandated Fee from \$1.00 to \$4.00 for any renewal or application for a business license or permit, effective January 1, 2018. This fee will provide a funding source for increased education on disability access and compliance with construction-related accessibility requirements to facilitate compliance with the federal and state disability laws.

*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. Obtain more information about legal obligations and complying 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) or call (916) 445-8100.
- 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).

### CITY OF ORANGE OFFICES:

**Location:** 300 E. Chapman Ave., Orange, CA 92866 **Mailing Address:** P.O. Box 11024, Orange, Ca 92856-8124  
**Hours:** 7:30 a.m. - 5:30 p.m. Monday – Thursday & alternate Fridays (See website)  
**Website:** [www.cityoforange.org](http://www.cityoforange.org) **Email:** [businesslicense@cityoforange.org](mailto:businesslicense@cityoforange.org)

<b>Business License Division</b>	(714) 744-2270	<b>Code Enforcement</b>	(714) 744-7244
<b>Building Department</b>	(714) 744-7200	<b>Police Department</b>	(714) 744-7380
<b>Building Inspection Request</b>	(714) 744-7216	<b>Fire Department</b>	(714) 288-2500
<b>Planning and Zoning</b>	(714) 744-7220	<b>Utility Billing</b>	(714) 744-2233

## CREDIT CARD AUTHORIZATION

(CREDIT CARD PAYMENTS CANNOT BE ACCEPTED FOR LESS THAN \$10.00 OR IN EXCESS OF \$5,000.00)

M/C or Visa \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Amount Authorized: \$ \_\_\_\_\_

Security Code (last 3 digits on back of card): \_\_\_\_\_ Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Home Ph #: ( ) \_\_\_\_\_ Work Ph #: ( ) \_\_\_\_\_

Billing Address: \_\_\_\_\_  
Street City State Zip