

415 S Ivy Ave Monrovia, CA 91016

Mondays - Thursdays 7 AM - 6 PM

Business License Application DEPARTMENT OF COMMUNITY DEVELOPMENT

Building Neighborhood and Business Services Planning 626-932-5582 | EMAIL: License@monroviaca.gov

The Monrovia Municipal Code requires that all businesses pay a business tax. All businesses are required to comply with all City codes and must be approved by the Department of Community Development. It is the responsibility of the applicant to maintain an active business license by renewing each year.							
		New Application	Change of	Ownership	Office Use C License No:	vnly	
Type of Business License:		 Commercial/Industrial Cottage Food Home Occupation Property Rental 		Expiration Date:			
		Non-Profit					
	**See reverse for additional information regarding AB 2184 – Address subject to public disclosure						
Business Information	Business Name: _						
	**Business Address:			City, State, Zi	p:		
	**Mailing Address:			City, State, Zi	p:		
	Business Phone:			Ema	il:		
	Driver License #::	Exp//	State		#:		
		□ Sole Proprietor □ Par	tnership				
	-		rporation	Seller Permit :	#:		
	Owner Name:			Phon	e:		
Owners of constitute	Home Address:			SSI	N:		
Owners	Second Owner:			Phon	e:		
	Home Address:			SSI	N:		
	Emergency Phone:						
	Business Operations Statement (REQUIRED): Include products/services offered or produced as well as any parts of the						
		ental to the primary use. Use :	additional page if	needed			
less	<u>e</u>						
Business	# of Employees: Current Use of Buil	Hours of	Operation: Mon	– Fri	_SatSun_		
m C	Current Use of Buil						
	Vacant more than 180	Days • Yes • No Building required	Modifications	Yes • No New	v building signage	□ Yes □ No	
IN-TOWN BUSINESSES ONLY - SEE REVERSE SIDE FOR SUPPLEMENTAL INFORMATION							
vit	I hereby certify under penalty of perjury that the information provided herein is to the best of my knowledge and belief, a true and complete statement. I understand that this application is not a license and that no business activity may						
Affidavit	commence until a business license is issued.						
Af	Signature				Date		
Zoning	Property Zoning:	Use Class	ification			_	
	Entitlements:	□ Permitted □ Not Perr	nitted				
	Conditional Use:	□ Late Night □ Drive-Th	iru 🛛 Alcoho	I CUP	#		
						_	

9	Supplemental Information REQUIRED IN-TOWN BUSINESS ONLY (Home Occupation Excluded)						
Hazardous Materials Screening	A Hazardous Materials Business Plan <u>IS</u> required to be submitted to the California Environmental reporting System (CERS) at https://cers.calepa.ca.gov when any of the following are used, handled or stored: Hazardous Materials and/or waste in amounts equal to or greater than:						
Hazardous Ma	 A Hazardous Materials Business Plan is <u>NOT</u> required for the following: Hazardous materials contained solely in a consumer product for direct distribution to, and use by, the general public; The transportation of hazardous materials accompanied by shipping papers in accordance with the provisions of Title 49, Code of Federal Regulations; Infectious Waste generated by Health Care Facilities regulated under Title 22 of the California Code of Regulations 						
COMPLETE Fire and HAZMAT Supplemental	 CHECK ONE OF THE FOLLOWING: No hazardous materials are handled, stored or used in the business. Chemicals are used in this business, but do not meet the requirements for reporting as detailed above. Chemicals are used in this business and a Hazardous Materials Business Plan and permit are required. Log in to cers.calepa.ca.gov and create a user name and password for your business. 						
	Is this a change from the previous business?	🗆 Yes	🗆 No				
	Does your facility have a sprinkler system?	🛛 Yes	🗆 No				
	Does your facility have a fire alarm system?	🛛 Yes	🗆 No				
	Does your facility have a Knox Box? If yes, the keys will need updating. (This is a small metal box located out in front of the facility usually black in color. It has keys for Fire Department after hour emergency entry.) How many square feet is the facility you intend to occupy? If the business is moving from another location (Monrovia or other city), list previous	□ Yes	□ No				
	location. If the fire department were to respond to your facility after hours, please list two emergency contacts to call for notification.	Phone number					
** AB 2184	Effective, January 1, 2019, personal information collected for purposes of issuing a business confidential, shall not be available to the public for inspection, and shall not be disclosed e administer the licensure program or comply with a judicial warrant, subpoena, or court or information" means a California driver's license or ID number, an individual taxpayer ID nu number, a social security number, income and tax information. <i>An applicant's residential address will remain confidential <u>only if</u> the applicant provides a the individual consents to receive service of process. If such address is a post office box or must be written approval that the post office box or private mail box consents to receive service of the individual consents to receive service of process. If such address is a post office box or must be written approval that the post office box or private mail box consents to receive service of the individual consents to receive service of process. If such address is a post office box or must be written approval that the post office box or private mail box consents to receive service of process.</i>	except as requinations of the second se	uired to al hicipal ID Iress where box there				