

**CITY OF TULARE**  
**APPLICATION FOR BUSINESS TAX CERTIFICATE**

DATE: \_\_\_\_\_

**OFFICIAL USE ONLY**

ACCOUNT NUMBER: \_\_\_\_\_ APPLICATION FEE: \_\_\_\_\_  
ZONE LOCATION: \_\_\_\_\_ S.I.C. CODE: \_\_\_\_\_ RECEIPT NUMBER: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_  
BUSINESS DESCRIPTION: \_\_\_\_\_  
BUSINESS ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE NUMBERS: BUSINESS: \_\_\_\_\_ HOME: \_\_\_\_\_  
FAX: \_\_\_\_\_ CELL: \_\_\_\_\_

OWNERSHIP TYPE: SOLE PROPRIETOR PARTNERSHIP L.L.C. CORPORATION TRUST  
(CIRCLE TYPE)

FEDERAL ID NUMBER: \_\_\_\_\_ WEB PAGE: \_\_\_\_\_  
STATE ID NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_  
RESALE NUMBER: \_\_\_\_\_ NUMBER OF EMPLOYEES: \_\_\_\_\_  
CONTRACTOR TYPE: \_\_\_\_\_ CONTRACTOR NUMBER: \_\_\_\_\_  
STATE LICENSE TYPE: \_\_\_\_\_ STATE LICENSE NUMBER: \_\_\_\_\_  
HOME OCCUPANCY PERMIT APPROVAL: \_\_\_\_\_ BUSINESS APN NUMBER: \_\_\_\_\_  
ESTIMATED GROSS RECEIPTS (6 MONTH PERIOD): \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
DRIVERS LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

**IMPORTANT NOTICE TO APPLICANT:** THE BUSINESS CERTIFICATE IS REQUIRED PURSUANT TO THE PROVISIONS OF TITLE V OF THE CITY OF TULARE CODE SOLELY TO RAISE REVENUE FOR MUNICIPAL PURPOSES AND IS NOT INTENDED FOR PURPOSES OF REGULATION. ISSUANCE OF A BUSINESS CERTIFICATE DOES NOT EXEMPT ANY INDIVIDUAL, ORGANIZATION, OR FIRM FROM COMPLYING WITH ALL REGULATORY PROVISIONS INCLUDING BUILDING, FIRE, POLICE, ZONING OR HEALTH AND SANITATION LAWS, OR ANY REQUIREMENTS FOR SPECIAL PERMITS.

APPLICANTS SIGNATURE: \_\_\_\_\_  
TITLE: \_\_\_\_\_

CITY OF TULARE FINANCE DEPARTMENT  
411 EAST KERN AVENUE, SUITE F – TULARE, CALIFORNIA 93274-4257  
PHONE: (559) 684-4232 FAX (559) 685-2366

\*\*\*MEMBER OF THE CALIFORNIA MUNICIPAL BUSINESS TAX ASSOCIATION\*\*\*

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**APPROVAL DATES BY DEPARTMENT**

PLANNING: \_\_\_\_\_ BUILDING: \_\_\_\_\_ FIRE: \_\_\_\_\_ POLICE: \_\_\_\_\_