



# Sandie Arnott

## TREASURER - TAX COLLECTOR

**Robin N. Elliott**  
ASSISTANT TAX COLLECTOR

### General Business License Application

Business Type:      Peddler/Solicitor      Bingo      Temporary Event  
                                 Public Dance Hall      Other: \_\_\_\_\_

#### Applicant Information

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email \_\_\_\_\_

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#### Business Information:

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

Nature of the Business: \_\_\_\_\_

Is this business a corporation?      Yes      No

If yes, please give the name and address of the person authorized to accept the service of legal process below.

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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#### Event Information (If applicable):

Event Location/Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

555 County Center, 1<sup>st</sup> Floor, Redwood City, CA 94063  
Treasurer      Tax Collector  
(650) 363-4580 ♦ Fax: (650) 363-4944      (866) 220-0308 ♦ Fax: (650) 599-1511  
Treasurer.smcgov.org      Tax.smcgov.org

Past Record of Applicant:

Have you ever been arrested for any crime? Yes No

If yes, when and where? List of charges: \_\_\_\_\_

Have you ever been convicted for any crime? Yes No

If yes, when and where? List of charges: \_\_\_\_\_

Are there any court cases pending against you? Yes No

If yes, when and where? List of charges: \_\_\_\_\_

Have you ever been on court probation? Yes No

If yes, when and where? List of charges: \_\_\_\_\_

Have you ever been issued a license by the County of San Mateo? Yes No

If yes, state when and for what purpose: \_\_\_\_\_

Have you ever had the following: 1) been refused a license, 2) had a license suspended/revoked, 3) voluntarily cancelled your license in any state to avoid revocation? Yes No

If yes, please give the details: \_\_\_\_\_

I hereby declare under penalty of perjury that the above statements and information are true. I am fully aware that if this application is denied by the license board for any reason, all fees paid with my application will be forfeited as stipulated by County ordinance.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**555 County Center, 1<sup>st</sup> Floor, Redwood City, CA 94063**  
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**Treasurer.smcgov.org Tax.smcgov.org**

**Tax Collector Staff Use Only**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

License Fee Paid: \$ \_\_\_\_\_

**License Board Recommendations:**

	<u>Date</u>	<u>Approval</u>	<u>Denial</u>
Sheriff:	_____	_____	_____
Health Officer:	_____	_____	_____
Planning/Zoning:	_____	_____	_____
Building Inspection:	_____	_____	_____
Fire Protection:	_____	_____	_____

The above application for a business license is hereby:                      Granted                      Denied

\_\_\_\_\_  
Chair of the County License Board

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

The application fee is \$50.00. Please remit payment along with your application to the San Mateo County Tax Collector's Office at 555 County Center, 1st Floor, Redwood City, CA, 94063