



BUSINESS LICENSE APPLICATION RENTAL PROPERTY

835 East 14th Street, San Leandro, CA 94577 (510) 577-3392

MAIL-IN COMPLETED APPLICATION WITH CHECK PAYABLE TO "CITY OF SAN LEANDRO"

New Application
 Change of Name
 Change of Address
 Change of Ownership

Owner Information from Property Title

Owner Name 1	Soc. Sec. #
Mailing Address _____ <i>Address</i>	Phone #
_____ <i>City</i> _____ <i>State</i> _____ <i>Zip</i>	Email
Owner Name 2	Soc. Sec. #
Mailing Address _____ <i>Address</i>	Phone #
_____ <i>City</i> _____ <i>State</i> _____ <i>Zip</i>	Email

Ownership
 Corporation
 Partnership
 Trust
 Ltd Liability Corp
 Sole Proprietor

Corporate Federal ID (IRS) Email _____

Rental Property Management Company Information Correspondence to be mailed to Property Management Company

Firm Name	Contact Name
Mailing Address _____ <i>Address</i>	Phone #
_____ <i>City</i> _____ <i>State</i> _____ <i>Zip</i>	Email

ALL PROPERTY MUST BE UNDER THE SAME OWNERSHIP

In accordance with the San Leandro Municipal Code, I hereby submit this application for a City business license for residential and/or non-residential property rental.

Residential Property Rental = The business of operating an apartment house, single family house rental, duplex, condominium, townhouse, hotel/motel, mobile home park, rooming or boarding house having one or more residential units, excluding the unit, if any, occupied by owner.

Non-Residential Property Rental = The business of renting or letting a building or structure of any kind, including a warehouse, mini-storage, industrial, commercial and/or office buildings to a tenant for purposes other than dwelling, sleeping or lodging. **(Complete back side of this form.)**

Start Date of Rental	Street Address	Zip	Building Type (apt, home, office, etc.)	# of Residential Units	Non-Residential Square Footage

CERTIFICATION & ACKNOWLEDGMENT

I declare under penalty of perjury that the statements made in this application are true. I further agree that business shall be conducted in accordance with the San Leandro Municipal Code. I understand that the filing of this application and payment of fees does not entitle me to commence or carry on any business in the City of San Leandro until said Business License is approved and issued. Upon issuance of a Business License, it shall be my responsibility to renew the license annually by January 31st.

Signature of Business Owner or Authorized Representative _____

Print Name _____ Date _____

OFFICIAL USE ONLY

Business License # _____

BUSINESS LICENSE FEES

Base Fee per License <i>(Valid until 6/30/18)</i>	\$136.20
# of Residential Units _____ x \$12.30	
Commercial Sq. Ft. (_____ ÷ 1,000) x \$20.40	
State CASp Fee	\$4.00
TOTAL AMOUNT DUE	

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 - The Department of Rehabilitation at www.rehab.cahwnet.gov - The California Commission on Disability Access at www.cdda.ca.gov.



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FOR NON-RESIDENTIAL PROPERTY ONLY: PLEASE COMPLETE THIS FORM FOR ALL TENANTS

#	Street Address	Tenant / Business Name(s)	Date of Lease	Contact Person
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