

ZONING CLEARANCE

OCCUPANCY PERMIT APPLICATION – **MUST BE SUBMITTED IN PERSON**

CITY OF WATSONVILLE – Community Development Department

250 Main Street

Watsonville CA 95076

(831) 768-3050 | (831) 728-6154 fax



PERMIT No.: _____

Fee: _____

GENERAL INFORMATION

BUSINESS NAME & DESCRIPTION _____

BUSINESS ADDRESS _____ PHONE _____

APPLICANT NAME _____ PHONE _____

APPLICANT ADDRESS _____

SITE INFORMATION

PREVIOUS BUSINESS/USE:

PROPOSED BUSINESS/USE:

ARE YOU PROPOSING CHANGES TO THE BUILDING?

Interior Remodel

Yes

No

Yes

No

Exterior Remodel

FLOOR AREA

1st Floor _____

Add'l Floors _____

Retail Sales Area _____

of Seats (if applicable) _____

PARKING

Required Off Street Parking: _____

SIGNAGE

Watsonville Municipal Code Section 8-6.201 references sign permit requirements for all permanent signs affixed to building exteriors. A sign application must be approved prior to placement of signage on a building. Failure to comply is a violation and subject to citation.

PLEASE PROVIDE THE FOLLOWING:

- Site Plan, 8.5" X 11", showing all dimensions between structures, property lines, parking area, etc.
- Floor Plan, 8.5" X 11", indicating proposed and existing rooms, offices, walls, windows, etc.

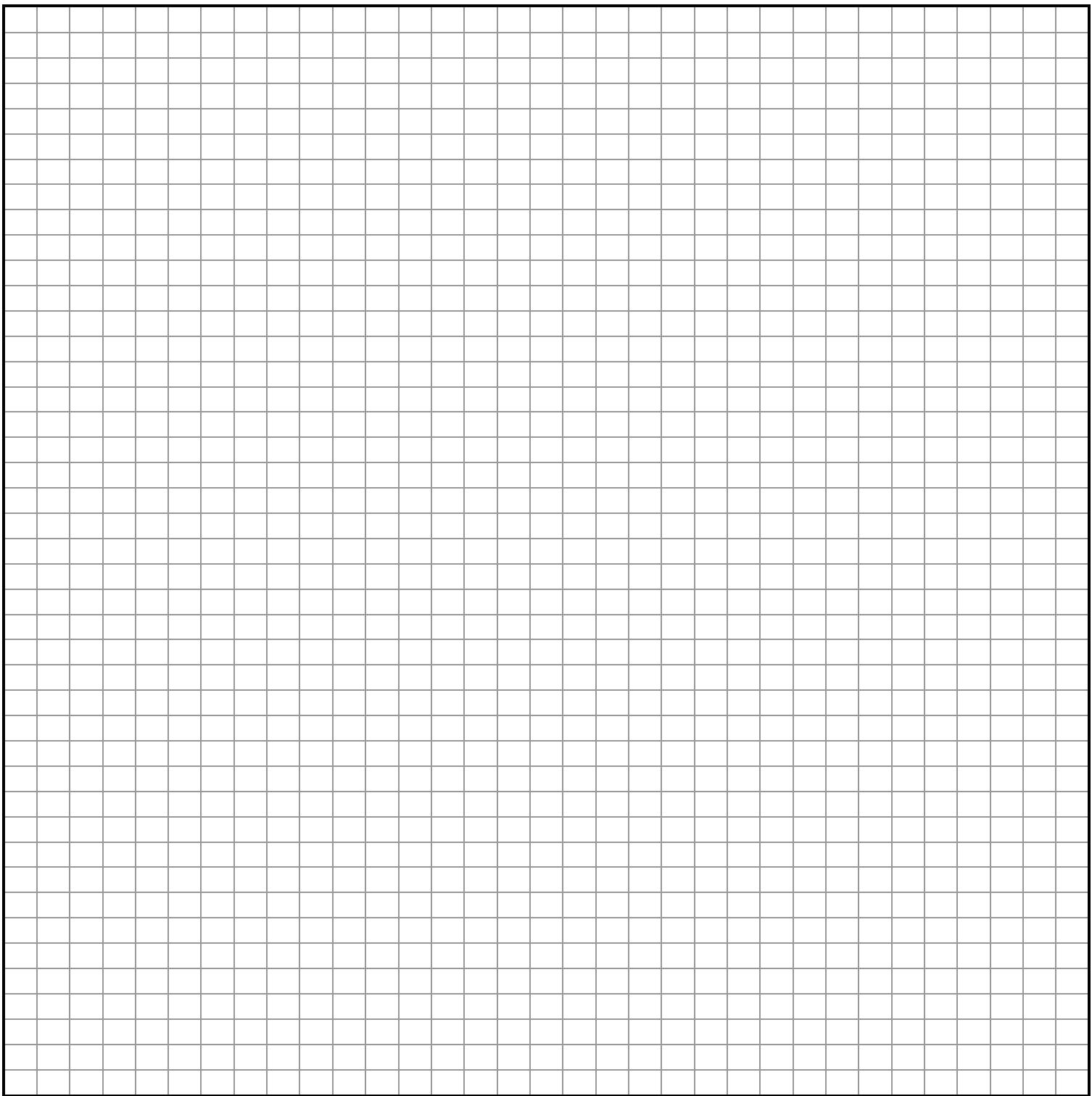
DECLARATION

I hereby declare under penalty of perjury that the information contained in this application is true and accurate to the best of my knowledge, that I agree to operate the described business in strict compliance with city zoning regulations, and that this application is being submitted with the consent of the property owner. I have no intentions of completing tenant improvements with the startup of this business and acknowledge that this form grants zoning clearance only and does not exempt me from fully complying with all other City requirements including but not limited to Building Permits, Fire Clearance etc.

Applicant's Signature

Date

SITE/FLOOR PLAN

A large, empty grid area for drawing a Site or Floor Plan. The grid consists of 20 columns and 20 rows of small squares, providing a scale for the plan.

Did you include:

Setbacks

Square Footage

Office Spaces/Walls

Windows

Parking

Any other changes?

STAFF USE ONLY

Upon completion to conform to this application, the proposed business may be issued a business license and is eligible to receive a Certificate of Occupancy Inspection from the Building Division. This business will comply with the provisions of Chapter 14 of the Watsonville Municipal Code with no significant environmental effect.

BUILDING DIVISION APPROVED BY: _____ DATE: _____ CONDITIONS/COMMENTS: _____ _____	<input type="checkbox"/> NO FURTHER ACTION REQUIRED BUILDING MODIFICATIONS OR REPAIRS? (Y/N): _____ PREVIOUS OCCUPANCY: _____ PROPOSED OCCUPANCY: _____ IS USE CONSISTENT WITH THE BUILDING? (Y/N): _____ IS THIS A CHANGE IN OCCUPANCY? (Y/N): _____ <input type="checkbox"/> LIFE SAFETY INSPECTION REQUIRED? <input type="checkbox"/> PLANS REQUIRED? <input type="checkbox"/> HOLD CLEARANCE FOR C OF O.
FIRE DIVISION APPROVED BY: _____ DATE: _____ CONDITIONS/COMMENTS: _____ _____	<input type="checkbox"/> NO FURTHER ACTION REQUIRED <input type="checkbox"/> FIRE OR HAZMAT PERMIT REQUIRED? <input type="checkbox"/> FIRE INSPECTION REQUIRED?
SANTA CRUZ COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH APPROVED BY: _____ DATE: _____	COUNTY HEALTH PERMIT REQUIRED? (Y/N): _____ <input type="checkbox"/> COUNTY HEALTH PERMIT PROVIDED
SOURCE CONTROL APPROVED BY: _____ DATE: _____ CONDITIONS/ COMMENTS: _____ _____	<input type="checkbox"/> NO FURTHER ACTION REQUIRED <input type="checkbox"/> SB 205 COMPLIANCE FORM PROVIDED SOURCE CONTROL INSPECTION REQUIRED? (Y/N): _____

<p>POLICE DEPARTMENT</p> <p>APPROVED BY: _____</p> <p>DATE: _____</p> <p>COMMENTS/CONDITIONS: _____ _____ _____</p>	<p><input type="checkbox"/> NO FURTHER ACTION REQUIRED</p> <p><input type="checkbox"/> PERMIT REQUIRED</p> <p><input type="checkbox"/> TRAVELING MERCHANT/SOLICITOR</p> <p><input type="checkbox"/> LIVE ENTERTAINMENT</p> <p><input type="checkbox"/> AMPLIFIED SOUND</p> <p><input type="checkbox"/> CARD ROOM</p> <p><input type="checkbox"/> FORTUNE-TELLING</p> <p><input type="checkbox"/> TOBACCO LICENSE</p>
<p>PLANNING DIVISION</p> <p>APPROVED BY: _____</p> <p>DATE: _____</p> <p>CONDITIONS/COMMENTS: _____ _____ _____</p>	<p><input type="checkbox"/> NEW BUSINESS/LOCATION</p> <p><input type="checkbox"/> NAME CHANGE</p> <p><input type="checkbox"/> OWNERSHIP CHANGE</p> <p><input type="checkbox"/> SIGN PERMIT REQUIRED</p> <p><input type="checkbox"/> OTHER: _____</p> <p>APN: _____</p> <p>ZONING DISTRICT: _____</p> <p>PRINCIPALLY PERMITTED USE (Y/N): _____</p>



City of Watsonville

Registration form Business License Tax

Business License Number

SIC Code

Community Development Department | 250 Main Street, Watsonville, CA, 95076 | (831)768-3450 or (831)768-3455

The City Municipal code requires all business to have an active business license (section 3-4.05) and pay the required tax (section 3-4.04). *It is unlawful to conduct business without complying with City, State and/or Federal laws and regulations.*

 Business Located in City Limits **Conducting Business in City Limits - (i.e., contractors)****I. Business Type, Name & Contact**

Business Type: <input type="checkbox"/> Sole Owner/Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Association / Other			
Business Name			Primary Phone ()
Business LOCATION Address		City	State Zip Code Secondary Phone ()
Business Mailing Address (if different)		City	State Zip Code Fax ()
Mail stop or Care of (if needed)		Website	

II. Owner/Representative Information

1	Name (first, last)	Title	Address	Social Security Number
	Daytime Phone	Cell phone	Fax	E-Mail Address
2	Name (first, last)	Title	Address	Social Security Number
	Daytime Phone	Cell phone	Fax	E-Mail Address

III. Business Information

Give full description of BUSINESS ACTIVITY:				
Start date in City	Location in City: <input type="checkbox"/> Commercial area <input type="checkbox"/> Residential area	Federal Employee ID # (FEIN)	State of California EDD Number	
Number of Owners/Officers in City	# of FULL time employees in City limits	# of PART time employees in City limits	County Health Permit Number	
State License Number	Type: <input type="checkbox"/> Licensed Contractor <input type="checkbox"/> other:	License Class & Expiration date	Sellers Permit Number	
Checkmark Alarm types present:	Checkmark all items present: <input type="checkbox"/> Hazardous Materials <input type="checkbox"/> Video Machines (# present _____)			
<input type="checkbox"/> Burglary <input type="checkbox"/> Water Flow	<input type="checkbox"/> Guard Dogs <input type="checkbox"/> Explosives	<input type="checkbox"/> Knox Box (key lock)	<input type="checkbox"/> Vending Machines (# present _____)	
<input type="checkbox"/> Fire <input type="checkbox"/> None	<input type="checkbox"/> Firearms <input type="checkbox"/> Flammable	<input type="checkbox"/> Special Alarm Tech	<input type="checkbox"/> Other:	
Alarm Company Name	Alarm Company Business Phone			

IV. Emergency Contact (other than Owner/Rep from above; must reside within 30 minutes)

1	Name (first, last)	Phone Number	Relationship	Address	City
	Name (first, last)	Phone Number	Relationship	Address	City

I understand that (1) the issuance of a license DOES NOT constitute a license to operate; (2) taxes are paid annually in advance and are not refundable; (3) the business license certificate must be posted in a visible place in the business; (4) failure to receive a renewal is not an excuse for unpaid tax; (5) I must notify this office of any change in location, ownership, business name, basis of tax, and of termination of business; (6) the business can NOT operate until premises have been inspected and certified for use by Community Development department and, if appropriate, Utilities department; and (7) the business must operate in compliance with all laws and regulations.

Applicant represents, under penalty of perjury, that they are authorized to submit this application, that all above statements are true, correct and hereby authorizes verification of these items and that all required licenses and approval are in full force and effect.

Applicant Signature	Print Name	Title	Date
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Business License Information

For business license questions, call
(831) 768-3450

The City of Watsonville is very thankful for your decision to make Watsonville your home. We have many ways to help businesses such as yours and encourage you to contact us about the programs available at 831-768-3015 or send an email to rhd@cityofwatsonville.org or go to our Economic Development website (<http://www.cityofwatsonville.org>).

COMPLETING YOUR BUSINESS LICENSE APPLICATION:

Section I. Select the appropriate "Business Type" for your company (only select one) and enter Business name, address and contact information.

Section II. Enter the owner information for 2 owners or Officers. The Social Security number is for internal purposes only and will be KEPT CONFIDENTIAL.

Section III. Provide information about the major activities of your business and/or services that will be provided. Other general information required is the business start date (estimate if not started yet), whether the business is in a commercial or residential area and the number of owners, full-time employees & part-time employees working within the City of Watsonville.

ID Numbers: Enter all the ID #'s that apply to your business (Federal Identification Number, California EDD, Health Permit and/or Resale number). See below for an explanation about these fields.

Alarms & items on-site: Checkmark each appropriate box for the alarms on your business site and/or any type of items on-site that emergency crews might need to know (guard dogs, hazardous materials, etc.).

Important information required for your business:

Alcohol sales: Any business that will sell alcohol will need a City "Use Permit" from the Community Development Department & a State License from California's Alcohol Beverage Control department (www.abc.ca.gov) (831) 755-1990

Businesses with Employees: You must obtain Workers' Compensation Insurance, a FEIN (see below) and obtain a California tax ID number from the Employment Development Department (1-800-300-5616).

Federal Employer/Taxpayer Identification Number (FEIN): Every business with employees and all partnerships, corporations, non-profits/associations must apply for and obtain a free FEIN. Go to (www.irs.gov) and search for "apply for EIN" for more information or use IRS FORM SS-4 or call the IRS at 1-800-829-4933.

Fictitious Business Name: Required if a business name does NOT include the surname (last name) of the individual owner or partners OR a business name that implies the existence of additional owners (this may not apply to corporations). For more information, go to: [www.sccoclerk.com/fbngen.htm] or call 831-454-2470.

Health Permit: Any business that involves food may require a Health Permit issued by the County of Santa Cruz "Environmental Health Services" department. For more information call 831-454-2022 or go to their website: <http://sccounty01.co.santa-cruz.ca.us/eh/ehhome.htm>.

Sellers Permit: Any business that intends to sale goods (wholesale or retail) must obtain from the State a "Sellers Permit". More information can be found online at: www.boe.ca.gov/index.htm or by calling 831-754-4500.

Solicitors Permit: If you plan to conduct "door to door" sales, you must obtain from the City's Police Department a solicitors permit. Call 768-3300 for more information.

"Starting your Business". Go online to [www.sos.ca.gov/business/resources.htm] for steps to starting a business.

FOR CITY USE ONLY

Comments:

Utilities	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<input type="checkbox"/> N/A	Signature	Date
Police	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<input type="checkbox"/> N/A	Signature	Date
<input type="checkbox"/> [11] No door to door solicitations	<input type="checkbox"/> [13] Not authorized for Rotational Tow Service	<input type="checkbox"/> [15] Sound limited to Property	<input type="checkbox"/> [62] Licensed issued with conditions		
<input type="checkbox"/> [12] Mobile sales only	<input type="checkbox"/> [14] Firearm sales valid	<input type="checkbox"/> [50] Valid only if service for Fixed Base Operator			
License	[5111]	\$	Quarter	\$	
Other	[]	\$	Prorated	\$	
		TOTAL			



City of Watsonville

"A Community of Opportunities"

California Sellers Permit

When is a California Sellers Permit required?

- All persons or entities engaged in business require a California seller's permit. Table 1 below gives examples of the types of business activities requiring a California seller's permit.

Table 1.

Type of Business	Description of sales
Firework Stands/Holiday Trees	The sale of fireworks and Christmas trees. You are required to register each location where sales are made and obtain a temporary seller's permit.
Garage Sales	When you have a garage sale and sell used items, you are generally not required to hold a seller's permit. However, if you have more than two garage sales within a 12-month period, you are required to hold a seller's permit.
Crafts	You are required to have a permit if you are selling, even temporarily, new or handcrafted items or used items you purchased for the purpose of reselling to others.
Conventions/Trade Shows	If you participate in California conventions and trade shows and make sales or take orders for sales at or during the conventions or trade shows, you will generally be required to hold either an ongoing or temporary seller's permit.
Swap Meets, Flea Markets or Special Events	In general, sellers at swap meets, flea markets and special events that make retail sales are required to obtain a seller's permit.
Any person or entity engaged in business in California	The requirement to obtain a seller's permit applies to individuals as well as corporations, partnerships, and limited liability companies. Both wholesalers and retailers must apply for a permit.

How do I apply for a seller's permit?

- The CDTFA (California Department of Tax and Fee Administration) is the state agency who issues sellers permits. Please visit the following link to register online.
www.onlineservices.cdtfa.ca.gov/

Is there a fee charged for a seller's permit?

- No. However, the CDTFA may require a security deposit to cover any unpaid taxes that may be owed if, at a later date, the business closes. The amount of the security will be determined at the time you apply.

What are the obligations for seller's permit holders?

- As a permit holder, you are required to:
 - Report and pay sales and use taxes
 - Keep adequate records
- You are also required to notify the CDTFA if you:
 - Change your business address
 - Change the ownership of your business
 - Add or drop a partner
 - Sell your business
 - Buy another business
 - Discontinue your business

How to contact the CDTFA.

- **1-800-400-7115**
- **Salinas Office: By appointment only – call for details**
 - **Phone: 831-754-4500**
 - **Fax: 408-277-1513**
 - **Email: salinasinquiries@cdtfa.ca.gov**
- **San Jose Office**
 - **250 South Second Street, San Jose, CA 95113**
 - **Phone: 408-277-1231**
 - **Fax: 408-277-1513**
 - **Email: sanjoseinquiries@cdtfa.ca.gov**

What does a seller's permit look like?

DISPLAY CONSPICUOUSLY AT PLACE OF BUSINESS FOR WHICH ISSUED

CALIFORNIA STATE BOARD OF EQUALIZATION

SELLER'S PERMIT

ACCOUNT NUMBER _____



NOTICE TO PERMITTEE
You are required to obey all Federal and State laws that regulate or control your business. This permit does not allow you to do otherwise.

IS HEREBY AUTHORIZED PURSUANT TO **SALES AND USE TAX LAW** TO ENGAGE IN THE BUSINESS OF SELLING TANGIBLE PERSONAL PROPERTY AT THE ABOVE LOCATION. THIS PERMIT IS VALID ONLY AT THE ABOVE ADDRESS.

THIS PERMIT IS VALID UNTIL REVOKED OR CANCELLED AND IS NOT TRANSFERABLE. IF YOU SELL YOUR BUSINESS OR DROP OUT OF A PARTNERSHIP, NOTIFY US OR YOU COULD BE RESPONSIBLE FOR SALES AND USE TAXES OWNED BY THE NEW OPERATOR OF THE BUSINESS.

Not valid at any other address

For general tax questions, please call our Information Center at 800-400-7115.
For information on your rights, contact the Taxpayers' Rights Advocate Office at 888-324-2798 or 916-324-2798.

BOE-442-R REV. 15 (2-06)



City of Watsonville

SB 205 Business License Stormwater Compliance Form

Business Name _____

Senate Bill (SB) 205, signed by Governor Newsom in 2019, requires a person or entity who conducts a business operation that is a “regulated industry” to demonstrate enrollment with the National Pollutant Discharge Elimination System (NPDES) permit program. By providing specified information on an initial or renewal City business license application, enrollment in the NPDES permit can be confirmed. The goal of the program is to reduce the spread of pollutants in storm water associated with industrial activities.

SB 205 does not affect all businesses. Only those businesses with primary Standard Industrial Classification (SIC) codes that are identified by the State Water Board as requiring enrollment in the Industrial General Permit (IGP) are affected. The questions below will guide you and the City in determining if your business requires enrollment in the IGP. **Completion and submission of this form is required for both new business license applications and renewals.**

1	What is the physical location/address of this business? Complete a separate SB 205 Compliance Form for each physical location/address in the City of Watsonville.	_____
2	What are the primary Standard Industrial Classification (SIC) codes for this business location? Look up your SIC Codes here: https://www.osha.gov/pls/imis/sicsearch.html and search by keyword(s) (for example: metal recycling) OR your insurance broker should also know your SIC code(s).	_____ _____ _____
3	Do any of the Primary SIC Codes from question #2 above match any of the regulated SIC codes listed on the Water Board website below? https://www.waterboards.ca.gov/water_issues/programs/stormwater/sicnum.shtml	Circle One YES NO
4	If you circled NO to Question #3, sign the back of the page and return this form with your business license application. Nothing more for SB205 is required of the business at this time.	
5	If you circled YES in Question #3, has the business already obtained an Industrial NPDES Permit?	Circle One YES NO

6	<p>If you circled YES in Question #5, provide the requested information regarding the existing Industrial NPDES Permit. Sign the back of the page and return this form with your business license renewal. You are in compliance with SB205.</p>	<p>WDID# _____</p> <p>WDID Application# _____</p> <p>NONA ID# _____</p> <p>NEC ID# _____</p>
7	<p>If you circled NO in Question #5, you need to enroll under the Stormwater Industrial General Permit (IGP) and provide the City with your permit numbers as described in Question #6 above.</p> <p>Sign and return this SB205 Compliance Form with your business license form. Start the process of obtaining the Industrial General Permit by contacting the State or Regional Water Board at the information listed below.</p>	

Declaration

I declare under penalty of perjury under the laws of California that the above information is true and correct to the best of my knowledge.

Print Name: _____

Signature: _____

Title: _____

Date: _____

For guidance on how to apply for coverage under the Stormwater Industrial General Permit, contact the State Water Board or local Regional Board:

State Water Board Contact:

Website: www.waterboards.ca.gov/water_issues/programs/stormwater/industrial.html

Email: stormwater@waterboards.ca.gov

Phone: 1-866-563-3107

Region 3 Central Coast Regional Water Board – San Luis Obispo Office Contact:

Website: www.waterboards.ca.gov/centralcoast/

Email: r3_stormwater@waterboards.ca.gov

Phone: 1-805-549-3147