DAILY BUSINESS LICENSE APPLICATION

CITY OF RIO VISTA * One Main Street, Rio Vista, CA 94571

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	NEW	☐ CHANGE	☐ RENEWAL	
Business Name (dba)			Business Phone	()
Business Address			City	Zip
Business Mailing Address			City	Zip
Please provide an	email address, if a	available. Email is our _l	oreferred method of co	mmunication.
Email address (Please print)				
ADDRESS OF ONE DAY BUSIN	ESS EVENT IN RI	O VISTA:		
EMERGENCY CONTACT NUM	BER WHIIF ON-S	ITE IN RIO VISTA:		
Type of Organization Sole Pro				
	prietor = Partine	ersnip <u>incorporation</u>	ı	
Sole Proprietor or Partnership: Owner's Name		Home Address		
City				
<u>Corporations</u> : Name of Corporat	ion			
the requirements of any other dep Rio Vista, State of California, or an whether or not you receive a rene icense is due and payable on the f BUSINESS LICENSE FEE One day vendor license:	ny other Governmowal notice. A regiirst day of busines	ental agency. All Busin onal or corporate licen s operations.	ess Licenses must be re	newed by the expiration dat
_	\$5.00 X		= \$	
		Then your t	otal tax is \$	
Any person in violation of the provis an officer or employee of this City in thereof, shall be punishable by a fine or both such fine and imprisonment.	any material fact to e of not more than fi **ALTERED	procure a license shall b ve hundred dollars or by i APPLICATIONS WILL NOT BE	e deemed guilty of a misde mprisonment for a period	emeanor, and upon conviction of not more than six months,
Authorized Signature of Applicant				Date
OFFICIAL USE ONLY		Signature	Date	
		_	_	
Processed by:		Date:	Permit Expires: _	