DAILY BUSINESS LICENSE APPLICATION

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

□ N	EW 🗆	CHANGE	☐ RENEWAL	
Business Name (dba)			Business Phone ()
Business Address		Ci	ity	Zip
Business Mailing Address		C	ity	_ Zip
Please provide an email address, if available. Email is our preferred method of communication.				
Email address (Please print)		Date	(s) for 1 Day License	::
Additional Dates if known:////////				
Business Activity:				
ADDRESS OF ONE DAY BUSINES	S EVENT IN RIO VIST	A :		
EMERGENCY CONTACT NUMBER	R WHILE ON-SITE IN	RIO VISTA:		
Type of Organization Sole Propri	etor \square Partnership	☐ Corporation		
Sole Proprietor or Partnership:				
Owner's Name		Home Address		
CitySta	teZip	Home Phone ()	
<u>Corporations</u> : Name of Corporation	1			
tio Vista, State of California, or any of whether or not you receive a renewal cense is due and payable on the first BUSINESS LICENSE FEES:	I notice. A regional or t day of business opera	corporate license is		
One day vendor license:	ุจ5.00 per day \$5.00 X da	ay	= \$	
		Then your total		
Any person in violation of the provision an officer or employee of this City in an thereof, shall be punishable by a fine of or both such fine and imprisonment.	y material fact to procure not more than five hund	e a license shall be dec red dollars or by impr TIONS WILL NOT BE ACC	emed guilty of a misde isonment for a period of EPTED**	meanor, and upon conviction of not more than six months,
Authorized Signature of Applicant				Date
OFFICIAL USE ONLY		Signature	Date	
	+			
Processed by:	ח	ate:	Permit Expires:	