DAILY BUSINESS LICENSE APPLICATION

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

	NEW	CHANGE	□ RE	NEWAL		
Business Name (dba)			Busines	Business Phone		
Business Address			City	Zip		
Business Mailing Address						
Please provide	an email address,	if available. Email is ou	<mark>r preferred metho</mark>	d of communication.		
Email address (Please print)						
Date of Event	Addition	nal Dates if known:				
Business Activity:						
ADDRESS OF ONE DAY BUSI	NESS EVENT IN R	IO VISTA:				
EMERGENCY CONTACT NU	MBER WHILE ON	-SITE IN RIO VISTA: _				
Type of Organization ☐Sole F	Proprietor	nershin Tacarparati	on.			
Sole Proprietor or Partnership	•		ות			
Owner's Name		Home Addres	SS			
City	State	_Zip	Phone			
Corporations: Name of Corpo	ration					
	enewal notice. A re e first day of busine	gional or corporate lic		st be renewed by the expiration d titute for a City business license. Y		
One day vendor license	-	-				
	\$5.00 X		= \$ total tax is \$			
an officer or employee of this City thereof, shall be punishable by a or both such fine and imprisonme	y in any material fact fine of not more than ent. **ALTERE	f the City of Rio Vista Mur to procure a license shall	nicipal Code, or know be deemed guilty o by imprisonment for BE ACCEPTED**	vingly or intentionally misrepresenting famisdemeanor, and upon conviction a period of not more than six months,		
Authorized Signature of Applicant						
OFFICIAL USE ONLY		Signature	e Date	:		
Processed by:		Date:	Permit Ex	pires:		