

**City of Taft**

**Special Events Permit &  
Business License Application**



Planning Department  
209 E. Kern Street  
Taft, California 93268  
(661) 763-1222 Ext. 24 or 33

FEE \$360.00

### APPLICATION FOR SPECIAL EVENTS PERMIT

Application No: \_\_\_\_\_ Date Received: \_\_\_\_\_ Fee Paid \$ 360.00  
Receipt No: \_\_\_\_\_ Received by: \_\_\_\_\_

In order to expedite processing of this Special Event Permit Application, and to eliminate unnecessary delays to the applicant, Planning Staff will not accept this application unless all items have been checked off and this application form has been signed and dated. In addition, all information is to be submitted in a neat and legible format and all drawings are to be drawn to scale. In the event errors or omissions are discovered, the application will be deemed incomplete and will be returned to the applicant for revision.

#### APPLICATION IS HEREBY MADE TO THE PLANNING DEPARTMENT THAT:

Property Owner (attach sheet if more than one property owner)

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### Applicant (attach sheet if more than one applicant)

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### BE GRANTED A SPECIAL EVENT PERMIT TO: \_\_\_\_\_

Property location or address: \_\_\_\_\_

Assessor's Parcel Number(s): \_\_\_\_\_

Legal Description of property(s): \_\_\_\_\_

General Plan Land Use Designation: \_\_\_\_\_

Zoning of the Subject Property: \_\_\_\_\_

**NOTE TO APPLICANT: Please check each of the following items when completed and made a part of this application.**

- Property Owner's signed authorization
- A site plan indicating the following: location and boundaries of the property, dimensions of all lot lines, names and location of all bordering streets and alleys, size and dimensions of all on-site buildings (existing and proposed), design and layout of vehicular access, on-site parking and loading areas, location of trash bins, location of all free standing signs (existing and proposed), location of all walls or fences, direction of existing and proposed drainage, scale, north arrow and date.
- Depict all on-site signs (existing and proposed); including size, height, material, color and lighting.
- Building Permits (for Circuses/Carnivals).
- Business Licenses (for Circuses/Carnivals).

**CITY STAFF REVIEW OF EACH SPECIAL EVENT PERMIT APPLICATION WILL INVOLVE CONSIDERATION OF THE FOLLOWING FACTORS:**

1. Compliance with all applicable requirements of the City's General Plan, Zoning Ordinance and Development Standards.
2. Compliance with the California Environmental Quality Act.

The Planning Commission will consider all aspects of the Special Event Permit. The ruling of the Planning Commission for a Special Event Permit will be final unless it is appealed within 10 days to the City Council; the ruling of the City Council will be final.

**APPLICANT'S SIGNATURE AND DATE INDICATES COMPLETION AND INCORPORATION OF THE ABOVE MENTIONED ITEMS INTO THIS SPECIAL EVENTS PERMIT APPLICATION.**

I certify that I am the record owner or authorized agent and that the information filed is true and correct to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

**Is this event a fund raiser:**  Yes  No

Name of Non-profit:

\_\_\_\_\_

Contact name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



energized for the future

209 E Kern St., Taft CA 93268-3292 Attn: Bus. License Coordinator • (661) 763-1350 EXT. 31

# BUSINESS LICENSE TAX APPLICATION

APPLICATION MUST BE FILLED OUT COMPLETELY AND SIGNED BEFORE LICENSE CAN BE ISSUED • PLEASE ALLOW 7-10 DAYS TO PROCESS THIS APPLICATION

Business Name \_\_\_\_\_ Bus. Phone ( ) \_\_\_\_\_  
Business Location \_\_\_\_\_ Bus FAX ( ) \_\_\_\_\_

(Cannot be P.O. Box per State of California, Business & Professions Code Section 17538.5)

Mailing Address \_\_\_\_\_ Start Date \_\_\_\_\_  
Rate Type \_\_\_\_\_

DESCRIPTION OF BUSINESS \_\_\_\_\_ SIC CODE \_\_\_\_\_

OWNERSHIP: Corporation  Corp-Ltd. Liability  Partnership  Sole Proprietor  Limited Partnership  Trust

State Lic. No. \_\_\_\_\_ Lic. Type \_\_\_\_\_ Expiration Date \_\_\_\_\_

Resale No. \_\_\_\_\_ FEIN No. \_\_\_\_\_ SEIN No. \_\_\_\_\_

### Enter below names of Owners, Partners, or Corporate Officers

Owner Name \_\_\_\_\_ Title \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
Home Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Cell Phone ( ) \_\_\_\_\_  
(Cannot be P.O. Box) Drivers Lic. No. \_\_\_\_\_

Owner Name \_\_\_\_\_ Title \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
Home Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Cell Phone ( ) \_\_\_\_\_  
(Cannont be P.O. Box) Drivers Lic. No. \_\_\_\_\_

### Additional Information

No. of Employees \_\_\_\_\_ No. of Rooms \_\_\_\_\_ Occupancy Limit \_\_\_\_\_ No. of Coin Operated Machine(s) \_\_\_\_\_  
No. of Units (Apartment or Hotel/Motel only) \_\_\_\_\_ No. of Deliveries per Week (Wholesalers) \_\_\_\_\_

### In case of emergency, please contact:

Name: \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Address \_\_\_\_\_

### Do you own or lease property? If Yes, please enter property owner's name, address, and phone number.

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Address \_\_\_\_\_

This license period is for the twelve months ending:

PLEASE CALCULATE AMOUNT DUE FROM SCHEDULE ON BACK OF THIS FORM BASED ON ESTIMATED GROSS RECEIPTS. ENTER TAX IN BOX BELOW AND SIGN.

Enter Estimated Gross Receipts: \$

Non-Refundable Review Fee one-time only \$

Estimated Gross Receipts are based on months:

Business License Tax \$

to

State Mandate Fee \$

TOTAL TAX DUE \$

Sales or use tax may apply to your business activities. You may seek written advice regarding the application of tax to your particular business by writing to the nearest State Board of Equalization office. For general information, please call the Board of Equalization at 1-800-400-7115.

**PAYMENT OF A BUSINESS LICENSE TAX DOES NOT RELIEVE THE APPLICANT (BUSINESS) OF THE REQUIREMENT TO COMPLY WITH OTHER REGULATIONS OF THE CITY, COUNTY, STATE, OR FEDERAL GOVERNMENT. I DECLARE, UNDER PENALTY OF PERJURY, THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT.**

Date: \_\_\_\_\_ Signature of Owner/Representative: \_\_\_\_\_

**RETURN APPLICATION TO ABOVE ADDRESS AND MAKE CHECK PAYABLE TO CITY OF TAFT**



**Where the average monthly gross receipts and sales are:**

	At least	But Less Than	JAN thru DEC	APRIL thru DEC	JULY thru DEC	OCT thru DEC
A	\$ -0-	2,000.00	\$ 30.00	\$ 22.50	\$ 15.00	\$ 7.50
B	2,000.01	4,000.00	50.00	37.50	25.00	12.50
C	4,000.01	6,000.00	70.00	52.50	35.00	17.50
D	6,000.01	10,000.00	90.00	67.50	45.00	22.50
E	10,000.01	14,000.00	110.00	82.50	55.00	27.50
F	14,000.01	20,000.00	140.00	105.00	70.00	35.00
G	20,000.01	30,000.00	170.00	127.50	85.00	42.50
H	30,000.01	40,000.00	200.00	150.00	100.00	50.00
I	40,000.01	50,000.00	250.00	187.50	125.00	62.50
J	50,000.01 and over		Average Monthly Gross Receipts multiply by 0.005 (Example \$98,525 X 0.005 = \$492.63)			

**ALL BUSINESS LICENSES EXPIRE DECEMBER 31 OF EACH YEAR.**  
License must be renewed within 15 days of expiration date.

**SALES AND SERVICE**

Accountant, certified public	Itinerant photographer;
Agent, real estate, all others	Laundry;
Airplane renting, sales or service	Machine shop;
Anesthetist	Manufacturer;
Architect	Mechanic;
Assayer	Medical lab or technician
Attorney	Mortgage companies
Auction house;	Oculist, optician, optometrists
Auditor	Painter;
Automotive sales and service	Pay or subscription television;
Bar and/or cocktail lounge;	Pharmacy;
Barbershop	Photographer and/or photographic studio;
Beauty Shop	Physician, surgeon, psychiatrist
Blacksmith;	Physiotherapist
Bookkeeping and accounting	Plumber;
Broker, real estate, insurance	Printing and publishing;
Carpenter	Private detective;
Chemists	Psychologist
Chiropracist	Repairman;
Chiropractor	Restaurant and/or dining room, coffee shop, lunch room, stand or lunch counter;
Cleaning and/or dyeing;	Retail and/or wholesale merchant;
Confectionery wagons;	Service station;
Contractors (Classification A, B, & C), All Builders;	Shoe repairing;
Dental lab (technician)	Soda fountain;
Dentist, orthodontist	Stockyard;
Designer, structural or building	Surveyors, licensed land
Draftsman	Television cable relay systems;
Electrician;	Travel bureau/ticket agency;
Engineer, registered	Veterinarian
Equipment lease or rental;	Warehouse;
Foundry;	Welder;
Garage;	The rendering of any service whatsoever.
Geologist	
Gymnasium;	
Ice plant;	

*or the rendering of any service whatsoever*

**PROFESSIONALS - \$30.00**

Accountant, certified public	Draftsman
Agent, real estate, all others	Engineer, registered
Anesthetist	Electrolysis
Architect	Esthetics (Skin care)
Assayer	Foot Spa
Attorney	Geologist
Auditor	Manicuring/Nail Salon
Barber	Medical lab or technician
Beautician (Cosmetology)	Mortgage companies
Bookkeeping and accounting	Nurse Practitioner
Broker, real estate, insurance	Oculist, optician, optometrist
Chemists	Physician, surgeon, psychiatrist
Chiropracist	Physiotherapist
Chiropractor	Psychologist
Dental lab (technician)	Surveyors, licensed land
Dentist, orthodontist	Veterinarian
Designer, structural or building	

**LICENSE TAX/FEE SUMMARY SCHEDULE**

<b>FLAT RATE BUSINESSES</b>	
Apartments or Courts	\$ 40.00 per year up to 4 units (ea. additional unit \$5 per year)
Arts and Crafts Fairs	\$ 30.00 per event 05-10 participants
	\$ 50.00 per event 11-24 participants
	\$ 75.00 per event 25-50 participants
	\$100.00 per event over 50 participants
Auto Wrecking	\$200.00 per year
Automobile Storage or Parking Lots	\$ 50.00
Billboard or Advertising Sign Business	\$ 100.00
Card Tables	\$1500.00 per year up to 5 tables + \$375.00 ea. table in excess of 5 tables.
Cleaners, Laundries	\$ 75.00 per year for each vehicle
Coin Operated Machines	\$ 30.00 per machine on site-maximum of \$200.00 per year
Collection Agency	\$ 40.00 per year
Dance Academy	\$ 30.00 per year
Hotels, Motels, Lodging Houses	\$40.00 per year less than 20 rooms-\$65.00 20-34 rooms-\$85.00 35-49 rooms- 50+ rooms-\$2.00
Campground, recreational vehicle park(RV park) or similar accommodation	\$40.00 per year for less than 20 spaces, \$5.00 per each space for 20 or more spaces
For operating commercial leasing property	\$30.00 for first 1,000 sq. ft., and \$20.00 per 1,000 sq. ft. thereafter
Importing Merchandise (Wholesale)	\$ 30.00 per year less than 2 deliveries/week \$40 2-3 deliveries/week - \$50.00 4 or more deliveries/week
Importing Merchandise (Retail)	\$ 50.00 per year for each vehicle
Itinerant Vendor, Peddler, Salesman, Solicitor, Etc.;	\$ 20.00 per quarter
Laundromats (less than 19 machines)	\$ 30.00 for the first machine, \$ 10.00 each additional per year – max. \$180
Palmist, Fortune Teller, Clairvoyant	\$500.00 per year
Rental Cars, Automobiles For Hire, Stages	\$ 30.00 per year for each vehicle
Secondhand Dealer or Secondhand Furniture Dealer	\$ 40.00 per year
Theater/Playhouse/Motion Picture	\$100.00 per year
Carnival/Traveling Show	\$500.00 for seven (7) days or less
Circus	\$250.00 for two (2) performances
Exhibition (vehicle)	\$ 30.00 for first day + \$10.00 per day for each exhibit in or upon vehicle
Open Air Theaters, Tents	\$ 30.00 first day + 10.00 per day for each additional day
Solicitor, Salesman, Service Repairman or Canvasser	\$ 10.00 registration fee per solicitor + tax on gross receipts
Taxicab	\$ 40.00 per year for each vehicle
Trading Stamp Company	\$100.00 per year
Trucking, Hauling	\$ 30.00 per year 8,000 lbs. and under
Wireless television Transmission	5% of gross revenues generated

**\*FOR ITEMS NOT SHOWN ON THIS SUMMARY SCHEDULE- PLEASE REFER TO TAFT CITY CODE.**