## APPLICATION FOR BUSINESS LICENSE STATE LICENSED CONTRACTOR – OUT OF CITY

## **DEPARTMENT of COMMUNITY DEVELOPMENT**

1700 WEST 162nd STREET / GARDENA, CALIFORNIA 90247-3732 / WWW.CITYOFGARDENA.ORG / PHONE (310) 217-9530

<ul> <li>□ New License □ Change C</li> <li>□ Ownership Change □ DE</li> </ul>	ACCOUNT NO:					
Business Name (DBA)		Email Address				
Business Address	CITY	STATE	ZIP	Business Phone No.		
Mailing Address	CITY	STATE	ZIP			
Corporate Name				Corp. Phone No.		
Corporate Address	CITY	STATE	ZIP			
Home Address	CITY	STATE	ZIP			
Service Address if Different than Hon	ne Address*					
Address	CITY	STATE	ZIP			
Nature of Business		State Contracto	or's #	Contractor's Classification *		
Name of Applicant		Circle Applicab	le Title	Cell Phone No.		
• •						
- I I I I I I I I I I I I I I I I I I I	000111000110111011011011		Owner			
Federal Tax ID No.	SSN/ CDL No./CA ID No. Taxpayer ID No	or Individual	Driver's	License		
Ownership:   Qualified Joint Venture   Sole Ownership   Partnership   Corporation   Trust   LLC						
Name of Officer or Partner	Title	Home or Ser	vice Address*	Phone No.		
1.						
2.						
3.						
I declare under penalties of perju and belief is a true, correct, and o is licensed under the State of Cal	complete statement of facts.	I further certify	that the above			
Signature and Title				Date		
Veteran Status: □ Special Disabled Vet □ Vietnam Vet □ Recently Separated Vet □ Other Protected Vet						
Payment By:   Cash Check or Money Order Credit Card						

\*The City of Gardena charges per State License Classification and requires a separate application and license for each classification that will be utilized within the City

\*Service address may be different than Home Address which will then remain confidential. Service Address shall be the person's home address or an address where the person consents to receive service of process, including a P.O. Box or Private Mailbox that complies with Business & Professions Code sec. 17538.5. If the applicant is using a P.O. Box or Private Mailbox, the applicant must also file copies of the US Postal Service Form 1583 that was filed with the US Postal Service and the acknowledgment form authorizing the commercial mail receiving agency to act as the agent for service of process with the City.

Highlighted items are not subject to disclosure without a judicial warrant, subpoena, or court order – only applies to home address if service address is provided.

Bus Type	□ Approved	□ Disapproved	
NAICS	Remarks:		
License Amount			
AB 1379			
Total Received	Ву:		Date: