

City of Monte Sereno

18041 Saratoga-Los Gatos Road • Monte Sereno, California 95030
 Phone: (408) 354-7635 Fax: (408) 395-7653
 www.cityofmontesereno.org



Business License Application

(OFFICE USE) BUSINESS LICENSE NO. _____

CREDIT CARD
 CONFIRMATION NO.

PLEASE TYPE OR PRINT.

BUSINESS NAME	OWNER NAME(S)	
BUSINESS ADDRESS (NO., STREET, P.O. BOX)	OWNER ADDRESS (NO., STREET, P.O. BOX)	
(CITY, STATE, ZIP)	(CITY, STATE, ZIP)	
MAILING ADDRESS , IF DIFFERENT (NO., STREET, P.O. BOX)	NATURE OF BUSINESS	
(CITY, STATE, ZIP)	<p style="text-align: center;">\$109.00</p> <p style="text-align: center;">*INCLUDES \$4.00 SB1186 FEE</p>	
BUSINESS PHONE		
FEDERAL IDENTIFICATION NO. OR SOCIAL SECURITY NO.		
STATE CONTRACTOR NO.	TYPE	EXPIRATION

I understand that the business license fee must be paid annually, based on a fiscal year beginning July 1 and ending June 30. This fee is not refundable.

I declare, under penalty of perjury, that the information contained in this application is true and correct, and that all required licenses are in full force and effect.

_____ DATE

_____ PRINT NAME AND TITLE

_____ SIGNATURE

CHECKS SHOULD BE MADE PAYABLE TO THE CITY OF MONTE SERENO AND SUBMITTED ALONG WITH THIS COMPLETED APPLICATION TO 18041 SARATOGA-LOS GATOS ROAD, MONTE SERENO, CALIFORNIA 95030.

NOTICE: 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.