



---

City of Huron/ P.O. Box 339/ 36311 Lassen Ave., Huron, CA. 93234-0339 •PH (559) 945-2241• FAX (559) 945-2609

July 2022

To all applicants,

We are accepting business license application by e-mail. If this option is best for you, please e-mail – [finance@cityofhuron.com](mailto:finance@cityofhuron.com)

For all first-time applicants the fee for a business license is \$164.00.

An online payment option is also offered but a convenience fee of \$1.01 applies.

Thank you for your business.

City of Huron, Planning and Building Department

*“Together We Can”*



City of Huron, 36311 Lassen Ave./PO Box 339, Huron, CA 93234-0339 • Phone (559) 945-2241 • Fax (559) 945-2609

### APPLICATION FOR BUSINESS LICENSE

BUSINESS NAME: \_\_\_\_\_

BUSINESS STREET ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

OWNER OF PROPERTY: \_\_\_\_\_ APN# \_\_\_\_\_

OWNER(S) OF BUSINESS: \_\_\_\_\_

TYPE OF BUSINESS AND ACTIVITIES TO BE CONDUCTED: \_\_\_\_\_

ESTIMATE OR ACTUAL GROSS SALES \$ \_\_\_\_\_

**COMPLETE ALL OF THE INFORMATION THAT APPLIES TO YOUR BUSINESS:**

OWNER OR MANAGER: \_\_\_\_\_

	Home Address	Bus Phone	Home Phone
EMERGENCY CONTACT:	_____	_____	_____

STATE CONTRACTOR'S LICENSE: \_\_\_\_\_

WORKER'S COMP POLICY: \_\_\_\_\_

OWNER/MANAGER DRIVER'S LICENSE: \_\_\_\_\_

IRS NO.: \_\_\_\_\_

STATE BOARD OF EQUALIZATION NO.: \_\_\_\_\_

NUMBER OF COMMERCIAL VEHICLES: \_\_\_\_\_

HEALTH DEPARTMENT CERTIFICATE NO.: \_\_\_\_\_

DO YOU PLAN TO BUY OR SELL SECOND-HAND MERCHANDISE? \_\_\_\_\_

DO YOU PLAN TO SELL FIREARMS? \_\_\_\_\_

NUMBER OF: WASHERS \_\_\_\_\_ DRYERS \_\_\_\_\_ BARBER CHAIRS \_\_\_\_\_

BEAUTY OPERATORS \_\_\_\_\_ BILLIARDS TABLES \_\_\_\_\_ CARD TABLES \_\_\_\_\_ MUSIC MACHINES \_\_\_\_\_

CARD DEALERS \_\_\_\_\_ MOTEL/HOTEL ROOMS \_\_\_\_\_ APT. UNITS \_\_\_\_\_ VENDING MACHINES \_\_\_\_\_

*"Together We Can"*



---

City of Huron, 36311 Lassen Ave./PO Box 339, Huron, CA 93234-0339 • Phone (559) 945-2241 • Fax (559) 945-2609

**VIDEO/PINBALL MACHINES** \_\_\_\_\_

**WILL ANY HAZARDOUS MATERIALS/CHEMICALS BE STORED ON SITE?** \_\_\_\_\_

**I UNDERSTAND THAT I HAVE APPLIED FOR A CITY OF HURON BUSINESS LICENSE ONLY. I UNDERSTAND THAT THERE MAY BE OTHER LICENSES OR PERMITS REQUIRED DUE TO THE NATURE, LOCATION OR OTHER CHARACTERISTIC OF MY PROPOSED BUSINESS ACTIVITY.**

**I HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT, TO THE BEST OF MY KNOWLEDGE.**

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**BUSINESS POSITION:** \_\_\_\_\_

---

**ZONING:** \_\_\_\_\_

**GENERAL PLAN:** \_\_\_\_\_

**PLANNING:** \_\_\_\_\_

**BUILDING:** \_\_\_\_\_

**FIRE:** \_\_\_\_\_

**OTHER:** \_\_\_\_\_



City of Huron, 36311 Lassen Ave./PO Box 339, Huron, CA 93234-0339 • Phone (559) 945-2241 • Fax (559) 945-2609

## WORKERS' COMPENSATION DECLARATION

**I HEREBY AFFIRM UNDER PENALTY OF PERJURY, ONE OF THE FOLLOWING DECLARATIONS:**

- I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided by Section 3700 for duration of any business activities conducted for which this license is issued.
- I have and will maintain workers' compensation insurance, as required by Section 3700, for the duration of any business activities conducted for which the license is issued.

**My workers' compensation carrier and policy number are:**

Carrier \_\_\_\_\_

Policy Number \_\_\_\_\_

- I certify that in the performance of any business activities for which this license is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with the provisions of Section 3700

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO \$100,000, IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.**

*"Together We Can"*