

FEE SCHEDULE

NEW APPLICANT FEE COMPUTATION

*Business Tax is based on a Fiscal Year July 1 – June 30
Business Tax is prorated Quarterly for New Businesses
Business Tax is based on Employee Count*

EMPLOYEE COUNT: _____

0-5 Employees \$ 100.00

Plus \$4.00 for every employee over 5 \$ _____

Plus \$2.00 for every employee over 300 \$ _____

Subtotal \$ _____

Prorating Employee Tax

July/Aug/Sept	Oct/Nov/Dec	Jan/Feb/March	April/May/June
<input type="checkbox"/> 100%	<input type="checkbox"/> 75%	<input type="checkbox"/> 50%	<input type="checkbox"/> 25%

(If Applicable) Recalculated \$ _____

Processing Fee \$ 50.00

State Mandated Fee (AB1379)* \$ 4.00

(Non-profit organizations are also subject to this fee)

Statement of Intended Use \$ See form for calculation

(Fire Inspection Fee) Required for all new businesses

GRAND TOTAL \$ _____

Businesses not located in Santa Fe Springs

See Miscellaneous
Application

FINANCE OFFICE USE ONLY

Business Start Date _____

Fiscal Year _____

Prorating Employee Tax

July/Aug/Sept	Oct/Nov/Dec	Jan/Feb/March	April/May/June
<input type="checkbox"/> 100%	<input type="checkbox"/> 75%	<input type="checkbox"/> 50%	<input type="checkbox"/> 25%

Employee Count _____

Employee Tax (Current Year) \$ _____

Previous Year (s)

_____ \$ _____
(Specify Year)

_____ \$ _____
(Specify Year)

Penalty _____% \$ _____

Processing Fee \$ _____

State Mandated Fee (AB1379)* \$ 4.00

Other _____ \$ _____
(Specify other)

Subtotal \$ _____

Statement of Intended Use \$ _____

GRAND TOTAL DUE \$ _____

EXISTING BUSINESS WITH CHANGE FEE COMPUTATION

*(Fees for changes apply only if Business License is current)
(If two or more changes are taking place, it is considered a new Business)
-see above calculation*

Change of Ownership \$ 30.00

Change of Address \$ 30.00

Change of Status or DBA \$ 5.00

Statement of Intended Use \$ See form for calculation

(Fire Inspection)

Required for Change of Ownership or Change of Address

Change of Ownership *(List previous Business Owner/President)*

Change of Address *(List previous Business Address)*

Change of Status or DBA *(List previous information)*

Business License No. _____

(Previous Owner/Address/DBA)

Expiration Date _____

**Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at: www.dgs.ca.gov/dsa/Home.aspx • The Department of Rehabilitation at: www.rehab.cahwnet.gov • The California Commission on Disability Access at: www.cdda.ca.gov*