



New Contractor's Application

For State-Licensed Contractors ONLY

Please read instructions on reverse PRIOR to completion

Mail completed applications to:

Oakland Business Tax Section, 250 Frank H. Ogawa Plaza, Suite 1320, Oakland, CA 94612

Phone: 510.238.3704

TTY: 510.238.3254

Business Activity Information:			
1. Business Type: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation* <input type="checkbox"/> Partnership* <input type="checkbox"/> LLP* <input type="checkbox"/> LLC* <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Non-Profit*--(must have 501c3) <small>*these entities must have a Federal Tax ID Number</small>	3. Business Name/DBA: <hr/>		
2. Business Start Date in Oakland: ____ / ____ /20____ <small>(when business activity began in Oakland)</small>	4. Business Location: <hr/>		
5. Type of Contractor: <input type="checkbox"/> Plumbing, Heating & Air-Conditioning <input type="checkbox"/> General/Building <input type="checkbox"/> Roofing & Siding <input type="checkbox"/> Drywall/Concrete <input type="checkbox"/> Electrical <input type="checkbox"/> Misc. Trade/Other: _____			
Please complete all APPLICABLE items:			
6. State Contractor's License Number & Expiration Date: _____ Expires on: ____ / ____ /20____	7. Federal Tax ID Number: _____	8. Number of Full-Time Employees: _____	
9. Zoning Permit Number (Required for ALL Oakland-based businesses): _____	10. This business is: <input type="checkbox"/> Privately Owned <input type="checkbox"/> Publicly Owned	11. Do you own this business location? <small>(for Oakland-based Contractors ONLY):</small> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Contact Information:			
Business Owner, Partner or Officer Name(s)	Title	Driver's License, State ID or City of Oakland Municipal ID Number	Social Security Number
12a.			
12b.			
12c.			
13. Mailing Name: Mailing Address:		Attention:	
14. Business Phone Number: ()	15. Contact/Cell Phone Number: ()	16. Website Address:	
17. Contact Email(s): _____ <input type="checkbox"/> CHECK THIS BOX IF YOU WISH TO OPT OUT OF PAPER CORRESPONDENCE – VALID EMAIL IS REQUIRED			
Fees, First Year Estimated Tax, Penalties, and Interest:			
18. Registration Fee: <small>((\$88.00 Reg. Fee + \$4.00 State Fee + \$2.00 City Technology & Recordation Fee)</small>	18.	\$	94.00
19. Penalty (if paid 31+ days after Start Date): <small>31-60 days late, ADD \$8.80; 61 or more days late, ADD \$22.00</small>	19.	\$	\$
20. Interest (if paid 31+ days after Start Date): <small>(\$88.00 Reg. Fee + Penalty) x 1% Interest (Per Month)</small>	20.	\$	\$
21. 20____ First year ESTIMATED Oakland Gross Receipts:	21.	\$	\$
22. Calculate First year ESTIMATED Tax Due = <small>Amount on Line 21 x .0018 OR \$60.00, whichever is greater</small>	22.	\$	\$
23. Total: <small>(ADD Lines 18-20 AND 22). Make checks payable to "Oakland Business Tax"</small>	Total:	\$	\$
Acknowledgement:			
I declare under penalty of perjury that to my knowledge all information contained on this form is true and complete.			
Signature	Title	____ / ____ /20____	

ACCT NO.: _____
 SIC: _____
 INDUSTRY CODE: _____
 INITIALS: _____
 PAY TYPE: _____
 DATE: _____

INSTRUCTIONS FOR COMPLETING THE NEW CONTRACTOR APPLICATION

Complete the Owner & Business information (Lines 1-17):

1. Check the appropriate box for the ownership type of this business entity. *Note: refer to Item 7.*
 2. Enter the date that you started your business activity in Oakland.
 3. Enter your business name as it appears on your State Contractor's License.
 4. Enter your business address—PO Boxes and/or private mail boxes are *not* allowed in lieu of a street address.
 5. TYPE OF CONTRACTOR—Check the appropriate box.
 6. STATE CONTRACTOR'S LICENSE—please enter the Contractor's License number and Expiration Date.
 7. FEDERAL TAX ID NUMBER—required if your business entity is a Partnership, Corporation, LLC or LLP.
 8. NUMBER OF FULL-TIME EMPLOYEES—enter the number of full-time employees in your business, but do not include any business owner(s).
 9. ZONING PERMIT NUMBER—required for all Oakland-based contractors. You must first complete a zoning clearance application and pay the zoning fee to the Building Services Dept. at 250 Frank H. Ogawa Plaza, 2nd Floor. Telephone: 510-238-3911. When this is completed, please remit a copy of the zoning permit along with this new Contractor's Application to our office to register your business.
 10. Is this business privately or publicly owned? Check the appropriate box.
 11. Do you own this business location? Check the appropriate box ('yes' or 'no').
 12. OWNER NAME(S)—Please list each business owner, partner or officer name(s), along with your Driver's License, State ID or City of Oakland Municipal ID Number(s) and Social Security Number(s).
 13. MAILING NAME & ADDRESS—Enter the mailing name and 'Attention' with a street address or PO Box to whom and where renewal forms and correspondence is to be sent.
 14. Enter your business phone number
 15. Enter your contact/cell phone number.
 16. Enter your company website on this line (*optional*).
 17. Enter your email address(es) on this line (*optional*).
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18. **INITIAL REGISTRATION FEE DUE**—*Preprinted* (\$88.00 Business Tax Registration Fee + \$4.00 State Mandated Disability Access and Education Revolving Fund* and \$2.00 City Technology & Recordation Fee). The total registration fee of \$94.00 must be paid at the time you register your business with our office. **NOTE: The Registration Fee is non-refundable.**
 19. **PENALTY ON LATE REGISTRATION FEE**—Add \$8.80 penalty if registration fee is paid 30-60 days after the rental start date OR add \$22.00 penalty if registration fee is paid 61 or more days after business start date in Oakland.
 20. **INTEREST ON LATE REGISTRATION FEE**—Calculate interest at 1% per month on the total of the registration fee plus penalty.
 21. **FIRST YEAR ESTIMATED OAKLAND GROSS RECEIPTS**—*required*. Please enter an estimation of your Oakland gross receipts for the first year or portion thereof.
 22. **FIRST YEAR ESTIMATED TAX DUE**—*required*. Calculate the First Year's Estimated Tax due, which will be either:
 - a) **\$60.00** if your estimated Oakland gross receipts is less than \$33,335 or
 - b) **\$1.80 per \$1,000** (amount on Line 21 x .0018) if your estimated Oakland gross receipts are \$33,336 or more
 23. **PAYMENT ENCLOSED**—Enter the total registration fee, penalty and interest and estimated tax due (add Lines 18-20 & 22). *Penalty and interest will be assessed on late registration fee and/or prior year late tax payments.*
- CREDIT CARD PAYMENTS**—We no longer accept credit cards on the application. If you wish to pay by Visa, Mastercard, Discover or ATM/debit card, you must do so in person in our office.

IMPORTANT TAX RENEWAL INFORMATION:

The \$94.00 payment is a one-time registration fee that is due at the time you begin your business activity in Oakland. You are required to file and pay the annual business tax each year on or before March 1. The tax rate is \$1.80 per \$1,000 of your annual Oakland gross receipts OR a minimum tax of \$60.00, whichever is greater. It is your responsibility to notify our office if you do not receive the annual renewal declaration and/or to update your account. Once you have discontinued your business activity in Oakland, you must notify our office in writing to ensure closure of your account.

\$4.00 STATE-MANDATED FEE*

On Oct 11, 2017, Governor Brown signed into law AB-1379, which adds a State fee of \$4.00 on any applicant for a local business license or similar instrument or permit, or renewal thereof. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop education resources for businesses in order to facilitate compliance with federal and state disability laws, as specified.

*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

Please be sure to sign and date this form. Remit your payment along with this completed application to:

**City of Oakland Business Tax Section
250 Frank H. Ogawa Plaza, Suite 1320
Oakland, CA 94612-2011**

Hours of Operation:

***Monday, Tuesday, Thursday & Friday: 8:00 a.m.—4:00 p.m.
Wednesday: 9:30 a.m.—4:00 p.m.***