



DEPARTMENT of COMMUNITY DEVELOPMENT

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

**Application for Business License
for Licensed Building Contractor- Out of City**

Account No. _____

Business Name		Email	
Corporate Name		Business Phone No.	
Business Address			
Mailing Address			
Nature of Business			
Name of Applicant		Cell Phone No.	
Residence Address		Home Phone No.	
Federal Tax ID No.		Contractor's Classification	
Social Security No.	Driver's License No.	State Contractor's No	
Ownership: <input type="checkbox"/> Qualified Joint Venture <input type="checkbox"/> Sole Ownership <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> LLC			
Name/Title of Officer or Partner		Phone No.	
Home Address of Officer or Partner			
Name/Title of Officer or Partner		Phone No.	
Home Address of Officer or Partner			
Name/Title of Officer or Partner		Phone No.	
Home Address of Officer or Partner			

I certify that the above named Business/Applicant is licensed under the provisions of Chapter 7033, Contractor License Law, Business and Professional Code, State of California, and that such license is in full force and effect.

Signature and Title	Date
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For City Use Only

Bus Type _____ SB1186 _____
 NAICS _____
 Fee _____ Total Rcvd _____

<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved Remarks: By _____ Date: _____
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