

PROFESSIONS & PERSONAL SERVICE

BUSINESS LICENSE TAX CALCULATION WORKSHEET

THE LICENSE TAX IS BASED ON THE NUMBER OF PERSONS PRACTICING THEIR PROFESSION OR OCCUPATION AND ON THE NUMBER OF EMPLOYEES OF THE BUSINESS.

Application fee

(For **NEW** applications only. **Do not pro-rate.**) \$ 35.00

Number of persons practicing their

Profession or Occupation: _____ x \$50.00= \$ _____

(Note: Owner(s) is considered 1 person practicing profession or occupation.)

Number of employees not practicing

Profession or Occupation : _____ x \$ 2.50= \$ _____

(Employee is a "support staff" member and includes both full and part-time employees).

TOTAL AMOUNT DUE \$ _____
or PRORATE IN TABLE BELOW

For NEW Business Applications ONLY:

The fee will be pro-rated based on the quarter in which business operations started, as follows:

1/01....3/31 = 100% Tax is 100% of total annual tax (not pro-rated)
4/01... 6/30 = 75% Tax pro-rated to 75% of the total annual tax
7/01....9/30 = 50% Tax pro-rated to 50% of the total annual tax
10/ 01 12/31 = 25% Tax pro-rated to 25% of the total annual tax

TAX PRO-RATE BY _____ % x **ANNUAL TAX** _____ = **TAX DUE** \$ _____
(Use scale above) (Tax amount from above)

Application Fee \$ 35.00

(NOTE: APPLICATION FEE OF \$35 IS **NOT** PRO-RATED.)

TOTAL AMOUNT DUE \$ _____

I have completed each section of this application and understand that if any sections are incomplete, it may delay the issuance of the License. In addition, I understand that any change in ownership will void this License and require a new application.

Under penalty of perjury, I declare that I am authorized to submit this application and that to the best of my knowledge and belief, all information in this Business License application is true and correct for the tax year stated, in compliance with the provisions of the City of Capitola's Business License ordinance.

Signature of applicant or agent

Please Print Name

Title

Date