

CONTRACTORS/BUILDERS

BUSINESS LICENSE TAX CALCULATION WORKSHEET

THE LICENSE TAX IS A FLAT AMOUNT, PLUS AN ADDITIONAL AMOUNT BASED ON THE NUMBER OF OWNERS, PARTNERS, PRINCIPALS AND/OR EMPLOYEES OF THE BUSINESS.

NEW Applications Only: (Current Businesses pay 100% annual rate or can choose quarterly license)

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

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

Please select only one: Annual or Quarterly

ANNUAL LICENSE

Base Tax: **\$ 50.00**

Number of Owners, Partners or Principals: _____ x \$5.00 = \$ _____

Number of employees (on Capitola jobsite): _____ x \$5.00 = \$ _____

Tax Due: = \$ _____ x _____ % = \$ _____
pro-rate %

NEW Applications Only - Application Fee: \$35.00 = \$ _____

Amount Due = \$ _____

QUARTERLY LICENSE

Quarterly Licenses are not pro-rated.

Please check one: 1/1 – 3/31 4/1 – 6/30 7/1 – 9/30 10/1 – 12/31

Base Tax: **\$ 25.00**

Number of Owners, Partners or Principals: _____ x \$2.00 = \$ _____

Number of employees (on Capitola jobsite): _____ x \$2.00 = \$ _____

Tax Due: = \$ _____

NEW Applications Only - Application Fee: \$35.00 = \$ _____

Amount Due = \$ _____

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