



# City of Calimesa

908 Park Avenue • Calimesa, California 92320

Phone (909) 795-9801 • Fax (909) 795-4399

<http://www.cityofcalimesa.net>

## OPERATING A BUSINESS IN THE CITY OF CALIMESA

A **Business License** is mandatory for all businesses that are either located within Calimesa and/or conducting business within Calimesa. If your business is located anywhere within Calimesa (excluding independent contractors operating under a business entity or virtual offices), then either a **Home Occupation Permit** is needed for a business operating from a residential location *OR* a **Certificate of Occupancy** is needed in a business that is operating from any commercial or industrial location.

All steps below must be completed before a Business License application may be processed. This process does not include any modifications to the building. If you are proposing any tenant improvements, then you will need to check-in with the Building & Safety Department, as inspections may be required. If you are proposing any changes to the exterior of the structure or site, including painting, landscaping, and permits for signs and/or banners, then you will need to check-in with the Planning Department, as inspections may be required. *NOTE: It is recommended that, prior to signing any lease agreement, the zoning is verified through the Planning Department.*

**Step 1. BUSINESS LICENSE:** You must complete and submit a Business License application (Attachment A) along with the applicable fee (\$25 for businesses inside of Calimesa, \$49 for businesses outside of Calimesa). There is no Business License application fee for non-profit organizations, but Articles of Incorporation must be submitted with the application. *NOTE: An initial business license is valid for six (6) months from approval, after which the business license may be renewed on an annual basis with the applicable fee.*

- If your business location is outside of Calimesa, then **STOP**. You do not need to submit any further information with your Business License application.
- For all other businesses located within Calimesa, you will also need to submit the following documentation in addition to your Business License application:
  - a) A letter from the Property Owner providing permission for you to have a business at the subject property *OR* a copy of the original signed lease agreement between you and the Property Owner *OR* a copy of the deed of trust showing you as the owner of the subject property. *NOTE: If your home-based business is operating inside a mobile home park, then you must obtain written permission from the park owner/representative.*

- b) Two (2) copies of the site plan that includes the existing floor plan with dimensions and existing fixtures, rooms, exits, etc. (Attachment B). *Exceptions: Independent contractors operating under a business entity and Calimesa virtual offices.*
- c) Completed Air Quality Permit Checklist, to be retained by business owner (Attachment C).

If your business location is in a residential location, then continue to Step 2 and skip Step 3. If your business location is in a commercial or industrial location, then skip Step 2 and continue to Step 3.

**Step 2. HOME OCCUPATION PERMIT:** You must complete and submit a Home Occupation Permit application (Attachment D) along with your Business License application and **all applicable fees of \$196.00** (\$171 Home Occupation Permit application fee and \$25 Business License application fee). *NOTE: The Home Occupation Permit fee is a one-time fee and remains valid as long as you maintain an active business license.*

**Step 3. CERTIFICATE OF OCCUPANCY:** You must complete and submit an Application for Certificate of Occupancy (Attachment E) along with your Business License application and **all applicable fees of \$339.00** (\$80 Planning Department review fee, \$80 Code Enforcement Department review fee, \$77 Building & Safety Department review fee, \$77 Fire Inspection fee, and \$25 Business License application fee). Exception: Non-profit organizations are to submit **all applicable fees in the amount of \$314.00** (\$80 Planning Department review fee, \$80 Code Enforcement Department review fee, \$77 Building & Safety Department review fee, and \$77 Fire Inspection fee). *NOTE: This initial fee does not include any additional inspections and/or permit fees that may be required.*

**Step 4. BUSINESS LICENSE RENEWAL:**

- The annual renewal fee for businesses located in Calimesa is **\$102.00** (\$25 Business License fee, \$77 Fire Inspection fee).
- The annual renewal fee for non-profit organizations located within Calimesa is **\$77.00** (Fire Inspection fee).
- The annual renewal fee for home-based businesses, virtual offices, and independent contractors operating under a business entity located within Calimesa, as well as wholesale distributors, is **\$25.00**.
- The annual renewal fee for businesses located outside of Calimesa is **\$49.00**.
- There is no annual renewal fee for non-profit organizations located outside of Calimesa. *NOTE: It is the responsibility of all business owners to either renew or cancel their business license with the Business License Clerk prior to its expiration in order to avoid an administrative citation.*

**ATTACHMENT A**

**BUSINESS LICENSE  
APPLICATION**



# City of Calimesa BUSINESS LICENSE APPLICATION

908 Park Avenue, Calimesa, CA 92320 • Phone (909) 795-9801 Fax (909) 795-4399

Receipt # \_\_\_\_\_

Business License # \_\_\_\_\_

## Fees for City of Calimesa Business License are as follows\*:

- **\$49.00** for businesses located outside of Calimesa (\$48 City fee + \$1 State fee<sup>[1]</sup>)
- **\$25.00** for businesses located within Calimesa or wholesale distributors (\$24 City fee + \$1 State fee<sup>[1]</sup>)
- **No fee** for non-profit organizations (attach Articles of Incorporation to application)  
*\*Business License fee does not cover the cost of an occupancy inspection, home occupation permit inspection, or any other required building or development fees*

**PLEASE NOTE:** An initial business license is valid for six (6) months from approval, after which the business license may be renewed on an annual basis for the Business License Fee and the annual Fire Inspection Fee (if applicable). It is the responsibility of the business owner to renew or cancel their business license with the Business License Clerk prior to its expiration in order to avoid an administrative citation.

Please type or print legibly: **INCOMPLETE APPLICATIONS WILL BE RETURNED FOR CLARIFICATION**

Business Name:	Business Phone #:
Mailing Address:	Business Fax #:
Business Location (Complete Address):	

Type of Business:
Description of Proposed Business Activities (please provide a detailed description):

Business Owner #1:		Email Address:	
Drivers License #:	Date of Birth:	SS#:	<input type="checkbox"/> N/A see FEIN below
Home Address:		Phone #:	

Business Owner #2:		Email Address:	
Drivers License #:	Date of Birth:	SS#:	<input type="checkbox"/> N/A see FEIN below
Home Address:		Phone #:	

Contractor License #:	Class: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Seller's Permit #: _____ <input type="checkbox"/> N/A I do not have a seller's resale permit	
<i>Sales or use tax may apply to your business activities. You may seek written advice regarding the application of tax to your particular business by writing to the nearest State Board of Equalization (BOE) office. For general information, please call the BOE at 1-800-400-7115.</i>	

Emergency Phone #:	Alarm: <input type="checkbox"/> No <input type="checkbox"/> Yes; Company Name:	
Federal EIN:	Health Permit #: _____ <input type="checkbox"/> N/A I do not have a health permit	
State EIN:	State Agency: <input type="checkbox"/> California <input type="checkbox"/> Other _____	
# of Full-Time Employees:	# of Part-Time Employees:	Business Sq. Ft.:

**APPLICATION FOR:**  Sole Proprietorship  Partnership (list all partners)  Corporation (list officers & titles)  See attached list

**WORKERS' COMPENSATION INFORMATION**

- I have Workers' Compensation coverage
- I do not have Workers' Compensation coverage
- I do not need Workers' Compensation coverage (SELF-EMPLOYED WITH NO EMPLOYEES)

Signature \_\_\_\_\_

Title \_\_\_\_\_

Workers' Compensation Insurance Company Name \_\_\_\_\_

**RECYCLING INFORMATION:**

Does your business recycle:  Yes  No

Please describe the type of material your business recycles:

Locations of other business commercial property or living accommodations (Rentals such as houses, apartments, motels, etc.)

**THIS SECTION MAY NOT PERTAIN TO YOU:**

1.

2.

Do you sell tobacco or tobacco paraphernalia?

Yes  No

Did you complete the SCAQMD Air Quality Permit Checklist?

Yes  No

Do you plan to sell alcohol?

Yes  No

Have you obtained a fictitious business name?

Yes  No  N/A does not apply to my business

*"I declare under penalties of perjury that this application has been examined by me and, to the best of my knowledge and belief, is a true, correct, and complete statement of facts. I further certify that the above business will be conducted in compliance with the applicable provisions of the City of Calimesa's Municipal Code and Ordinances, and other State and Federal laws. I acknowledge that this business license shall be due and payable in advance for a period of six months at the time the original license is issued. Upon license expiration thereafter, my annual license renewal taxes shall be due and payable in advance for a period of one year."*

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Welcome to the City of Calimesa and our business community. We wish you every success in your business venture and encourage you to take advantage of any assistance we may be able to provide. If we can be of any assistance, please do not hesitate to contact us. Calimesa's City Hall office hours are 7:00 a.m. to 5:30 p.m. Monday through Thursday.

\*\*\*\*\*  
**-THIS SECTION IS FOR CITY USE ONLY-**

**-ZONING INFORMATION-**

Zone Designation:	Number of Required Legal Parking Spaces:
Permitted Business Activities:	Additional Requirements:
Occupancy Inspection Date: _____ <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Requires/Required: <input type="checkbox"/> CUP <input type="checkbox"/> DPR <input type="checkbox"/> MDPR <input type="checkbox"/> Other: _____

**-DEPARTMENT APPROVALS-**

Planning:	Date:	Building:	Date:
Code Enforcement:	Date:	Sheriff:	Date:
Fire:	Date:	Other:	Date:

[1] Senate Bill 1186, Section 4469: 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: 1) The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx), 2) The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov), and 3) The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).

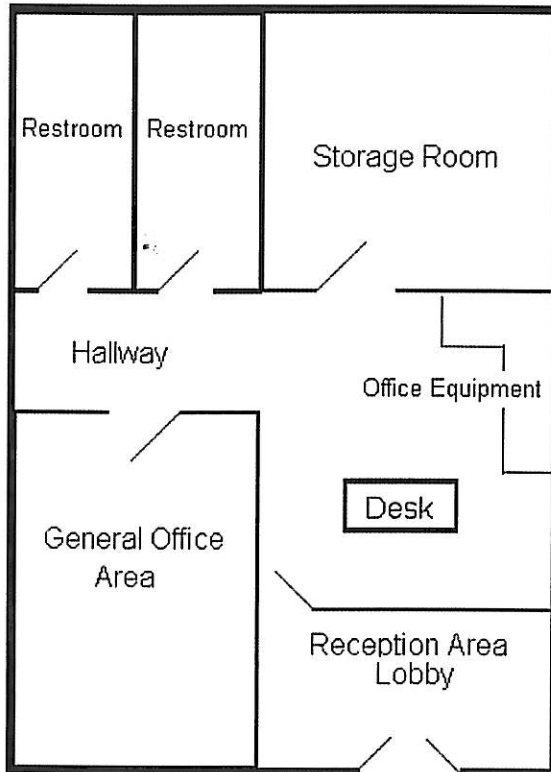
**ATTACHMENT B**

**FLOOR PLAN AND SITE PLAN  
EXAMPLES**

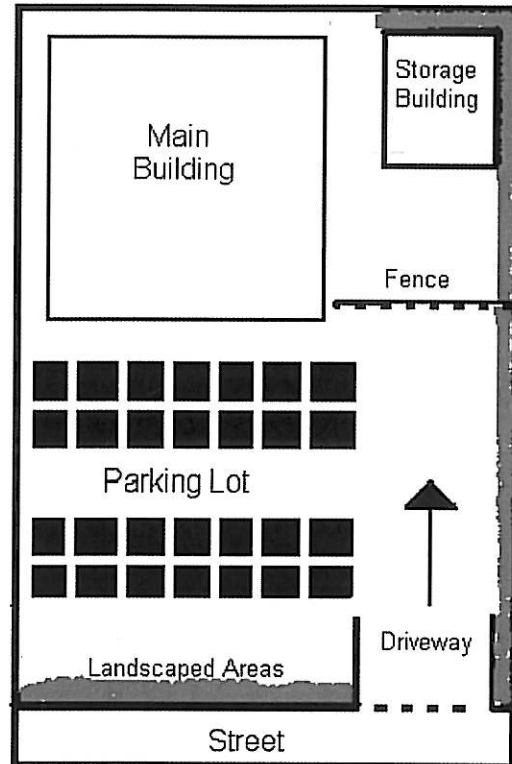
## Floor Plan & Site Plan Examples

### Certificate of Occupancy Permit Process City of Calimesa Community Development Department

Floor Plan Example



Site Plan Example



*Please Note: The above is an example only. Please use a separate sheet for each drawing (floor plan and site plan). Plans are not required to be professionally drawn, but should accurately depict the building and site layout. Plans should be legible and to some discernable scale. Poorly drawn plans, or inaccurate plans will be rejected will cause delays in the issuance of the occupancy permit and business license.*

*Please call the Community Development Department at 909-795-9801 with questions.*

**Floor Plans:** On a separate piece of paper, please show the basic building/office layout, including location of main entrances, exits, restrooms, office equipment areas, receptionist's desk, hallways, etc. Please also note the location of fire extinguisher(s), storage areas, etc.

**Site Plans:** Site plans are for not required for businesses located within a multi-tenant business park or multi-tenant office building *unless* outside storage is proposed. Please provide a sketch of the property where the building sits, indicate the main building and any detached storage structures or other buildings on the property, indicate location of streets, driveways, alley ways, drive isles, parking areas, landscaped areas, fences, etc.

## **ATTACHMENT C**

### **AIR QUALITY PERMIT CHECKLIST (to be retained by business owner)**





# South Coast Air Quality Management District

21865 Copley Drive, Diamond Bar, CA 91765-4182  
(909) 396-3529 • [http:// www.aqmd.gov](http://www.aqmd.gov)

## Air Quality Permit Checklist

California Government Code Section 65850.2 prohibits cities from issuing an occupancy permit to a business without clearance from the local air quality agency. This Checklist will determine if you need to obtain clearance from the South Coast Air Quality Management District (AQMD).

Company Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax Number: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Applicant (print name): \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

- Will the facility have any of the following equipment? Yes  No

Charbroiler

Dry cleaning machine

Spray booth

Printing press (screen/lithographic/flexographic)

Internal combustion engine greater than 50 HP (excluding motor vehicles)

Boiler/combustion equipment (greater than 1 million BTU/hr. maximum input)

Abrasive blasting cabinet/room

Baghouse/cartridge-type dust filter/scrubber

Motor fuel storage and dispensing equipment

- Will any of the following operations be performed? Yes  No

Application of paints or adhesives

Etching, plating, casting, or melting of metals

Molding, extruding, or curing of plastics

Mixing and blending of liquids and/or powders

Storage of acids, solvents, organic liquids, or fuels

Production of fumes, dust, smoke, or strong odors

**If you answered “No” to both questions, this checklist is your clearance from AQMD.** If you answered “Yes” to either question, you must contact AQMD to determine if air quality permits are required. If permits are needed, AQMD will assist you in submitting permit application(s) and then provide you with a clearance letter. You can call AQMD at their Small Business Assistance Office at **1-800-CUT-SMOG (1-800-288-7664)**.

**ATTACHMENT D**

**HOME OCCUPATION PERMIT  
APPLICATION**



# City of Calimesa HOME OCCUPATION PERMIT APPLICATION

908 Park Avenue, Calimesa, CA 92320 • Phone (909) 795-9801 Fax (909) 795-6187

## Applications to be submitted and fee schedule (all fees are due at the time of application submittal):

- Business License Application  
**\$49.00** for businesses located outside of Calimesa (\$48 City fee + \$1 State fee<sup>[1]</sup>)  
  
**\$25.00** for businesses located within Calimesa or wholesale distributors (\$24 City fee + \$1 State fee<sup>[1]</sup>)
- Home Occupation Permit Application  
**\$171.00** one-time fee

## Procedures:

- Completion of the appropriate applications.
- Submittal to the Business License Clerk.
- Determination of ownership of residence: If you own the residence where the business is location, a copy of the Grant Deed stating you are the owner of the residence is required. If you are renting the residence where the business is located, a written letter from the owner of the residence stating that he/she grants you permission to run a business out of the residence is required. Also a written statement on how you will be conducting business from your home must be included on the Business License Application.
- Approval through the Planning and Code Enforcement Divisions.
- Issuance of a Business License.

## APPLICANT INFORMATION:

Applicant: \_\_\_\_\_

Business Name: \_\_\_\_\_

Description of Business: \_\_\_\_\_

\_\_\_\_\_

Business Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**CRITERIA FOR APPROVAL:**

**Initial**

- 
- Only occupants of the dwelling may be engaged in the home occupation, no employees.
- 
- The home occupation shall be an incidental and accessory use and shall not change the principal character of the dwelling unit.
- 
- There shall be no direct sales of products or merchandise from the home.
- 
- The use shall not generate pedestrian or vehicular traffic beyond that normal to the residential district.
- 
- The home occupation shall not involve the use of advertising signs on the premises, or any other local advertising media which calls attention to the fact that the home is being used for business purposes, telephone number listing excepted.
- 
- No building or space outside of the main building shall be used for home occupational purposes. No outdoor storage shall be permitted.
- 
- The home occupation shall not involve the use of commercial vehicles for delivery of materials to or from the premises.
- 
- No use shall create or cause noise, dust, light, vibration, odor, gas, fumes, toxic/hazardous materials, smoke, glare or electrical interference or other hazards or nuisances.
- 
- No home occupation shall be initiated until a current business license is obtained.
- 
- A Home Occupation Permit shall not be transferable.
- 
- There shall be no more than one (1) home occupation in any dwelling unit.
- 
- If the home occupation is to be conducted on rental property, the property owner's written authorization for the proposed use shall be obtained prior to the submittal for a Home Occupation Permit.
- 
- No vehicles or trailers except those normally incidental to residential use shall be kept on the site.
- 
- Any special condition established by the Planning Director and made part of the record of the Home Occupation Permit, as deemed necessary to carry out the intent of Calimesa Municipal Code Section 18.15.090.
-

## **PROHIBITED USES:**

The following list presents example uses that are neither incidental to nor compatible with residential activities, and are prohibited:

1. Barber and beauty shops (available through Development Plan Review);
2. Business which entail the harboring, training, breeding, raising or grooming of dogs, cats, or other animals on the premises;
3. Carpentry and cabinet making;
4. Medical and dental offices, clinics, and laboratories;
5. Mini storage;
6. Repair, fix-it, or plumbing shop;
7. Storage of equipment, materials, and other accessories to the construction and service trades;
8. Vehicle repair (body or mechanical), upholstery, and painting;
9. Welding and machining; and
10. Any other use determined by the Planning Director to be neither incidental nor compatible with residential activities.

## **REVOCACTION:**

A Home Occupation Permit may be revoked or modified by the Planning Director if any of the following findings can be made:

1. That the use has become detrimental to the public health, safety, or welfare, or constitutes a nuisance;
2. That the permit was obtained by misrepresentation or fraud;
3. That the use for which the permit was granted has ceased or was suspended for six (6) or more calendar months;
4. That the condition of the premises, or the area of which it is a part, has changes so that the use is no longer justified under the meaning and intent of Calimesa Municipal Code Section 18.15.090.
5. That one (1) or more of the conditions of the Home Occupation Permit have not been met; or
6. That the use is in violation of any statute, ordinance, or regulation in effect at the time of permit issuance.

**ACKNOWLEDGEMENT AND AGREEMENT HOME OCCUPATION PERMIT:**

As the owner of the proposed business as outlined in this Home Occupation Permit application, I understand and accept the criteria for approval, prohibited uses, and revocations contained in this application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

[1] Senate Bill 1186, Section 4469: 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: 1) The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx), 2) The Department of Rehabilitation at [www.rehab.ca.gov](http://www.rehab.ca.gov), and 3) The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).

\*\*\*\*\*FOR CITY USE ONLY\*\*\*\*\*

<p><b>Assessor's Parcel Number:</b> _____ <b>Zoning:</b> _____</p> <p><b>Comments:</b> _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____</p> <p><b>Approval/Denial:</b> _____ _____ _____</p>
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**ATTACHMENT E**

**APPLICATION FOR  
CERTIFICATE OF OCCUPANCY**



*City of Calimesa*

Receipt # \_\_\_\_\_

**APPLICATION FOR CERTIFICATE OF OCCUPANCY**  
For Business License Issuance

Check the following that applies:

- New Business       Change in Business use       Change in Business Name  
 Change of Ownership       Expansion of use

**BUSINESS INFORMATION:**

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Primary Business Phone #s: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Description of Business Activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**BUSINESS OWNER INFORMATION:**

Business Owner Name: \_\_\_\_\_

Applicant's Name (if Different): \_\_\_\_\_

Owners Primary Phone: \_\_\_\_\_

Owners Mailing Address: \_\_\_\_\_

Applicants Mailing Address (if different): \_\_\_\_\_

**PROPERTY OWNER INFORMATION:**

Name of Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

**BUILDING INFORMATION:**

Number of Buildings: \_\_\_\_\_ Square Footage for each: \_\_\_\_\_

Number of Existing Off-Street Parking Spaces: \_\_\_\_\_ Handicap Spaces: \_\_\_\_\_

Previous Use of Structure: \_\_\_\_\_

Previous Business Name: \_\_\_\_\_



# APPLICATION FOR CERTIFICATE OF OCCUPANCY (CONTINUED)

**QUESTIONNAIRE (Please check yes or no, and/or provide requested information):**

Is the building is equipped with an alarm system?  Yes  No  
 If yes, please provide the alarm company name and phone number: \_\_\_\_\_

Will there be storage of combustibile materials?  Yes  No  
 If yes, please list those materials: \_\_\_\_\_

Will the business be involved in handling of hazardous materials?  Yes  No  
 If yes, please provide us with a separate list of said hazardous materials or list them here: \_\_\_\_\_

Will there be any outside storage of materials or items for sale?  Yes  No  
 If yes, please show on the required diagram the location of the outside storage.

Does the business involve the sale of alcohol?  Yes  No

Will the business involve the handling or preparation of food?  Yes  No

Does the business have use of a dumpster or trash container?  Yes  No

If yes, then please include the location on the required diagram.

Does the building have an automatic sprinkler system?  Yes  No

Will signs be use on our outside of the building?  Yes  No

(Please note that a separate sign permit is required, even if re-facing an existing sign)

Total number of employees: \_\_\_\_\_ Total number of employees working at one time: \_\_\_\_\_

Hours of operation: \_\_\_\_\_ to \_\_\_\_\_ days \_\_\_\_\_

List any additional permits needed to run the business (excluding permits from the City): \_\_\_\_\_

**PLEASE READ CAREFULLY BEFORE SIGNING:**

“I declare under the penalties of perjury that this application has been examined by me and, to the best of my knowledge and belief, is a true, correct, and complete statement of facts. Furthermore, I agree to allow employees of the City of Calimesa or any agent thereof, to conduct random inspections of the business for compliance with zoning, code enforcement or building code issues during any listed hour of operation without notice or cause. Furthermore, we warrant not to use or occupy this building(s) until all City regulations and conditions concerning this building(s) have been complied with and a Certificate of Occupancy has been issued and it is understood and agreed that the City of Calimesa, through its employees or agents, is hereby authorized to order immediate discontinuance of any and all utilities for any violation of City ordinance or regulations and conditions prior to the final approval of use and issuance of its Certificate of Occupancy.

Business Owner Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
 (REQUIRED if different from Business Owner)

- OFFICIAL USE ONLY -

Zone Designation:	Number of Required Legal Parking Spaces:
Intended Use Meets Zoning: _____ Yes <input type="checkbox"/> No <input type="checkbox"/>	Available off-Street Parking Spaces
Occupancy Inspection Date: _____ <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Requires/Required: <input type="checkbox"/> CUP <input type="checkbox"/> DPR <input type="checkbox"/> MDPR <input type="checkbox"/> Other
Planning Dept. Approval:	Building Dept. Approval:
Code Enforcement Approval:	Sheriff Dept. Approval:
Fire Dept. Approval:	Business License Approval: