☐ **New Application**

☐ **Renewal**

Town of Hillsborough
Home Business Permit Application

- Processing time for home business license is 30 days – Please complete all fields
- Annual Permit Fee is $126.00 ($125.00 application fee plus $1.00 SB1186 / DISABILITY ACCESS FEE)
- Business License is valid from July 1, 2013 and expires June 30, 2014
- Application and fee may be mailed to:
  Finance Department, Town of Hillsborough, 1600 Floribunda Avenue, Hillsborough, CA 94010
- Questions about obtaining a license, call (650)375-7402

Applicant Information	
Business Name	
Applicant's Name	
Street Address	
City ST ZIP Code	
Mailing Address (if different)	
E-Mail Address	
Home Phone	
Business/Cell Phone	

Property Owner's Consent (if different than applicant)	
I, property owner of _____, authorize submittal of this business application.	
Date signed	Property Owner's Signature

Business Information		
1. Describe the business		
2. Number of Employees: Describe responsibilities and/or services/ work hours	_____ Family Members/Resident	____ Other than Resident
3. Types of materials, tools, machinery (if any) will be used for this business		
4. Type of solvents, paints, resins, corrosives or other chemicals (if any) will be used in this business		
5. Number of people visiting this site each week to deliver or collect items (Describe types of vehicles and types of deliveries)		
6. Will the sale of goods or services occur at this address? If yes, provide full description of transaction (e.g. weekly meetings with clients, etc.)		

7. Number of Vehicles	
___ # of Vehicles used for business ___ # of Vehicles parked during business hours ___ # of Vehicles parked during the night	*Type of Vehicles:*
8. How will this business be advertised?	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I certify under penalty of perjury that I/we have read the Town of Hillsborough Home Business Provisions attached to this application and will operate this business in compliance with same. The owner/s of the property (if different than applicant) have authorized this business application. Any changes to the information provided herein must be reported to the Finance Department at Hillsborough Town Hall. I consent to allow Town personnel to enter the above-described premises at reasonable times to verify compliance with applicable laws. I understand that violation of any applicable section will result in immediate revocation of the permit and the issuance of a court citation.

Name (printed)	
Signature	
Date	

Office Use Only

Finance Routing Checklist

☐ Fire ☐ Police ☐ Planning ☐ Other _____

Date Received:_____ Amount Paid: $_____ Check #_____ Received By:_____

Fire Dept. Approval

☐ Approved ☐ Approved, with conditions ☐ Denied

Conditions / Reason for denial	
Signature/Date	

Police Code Enforcement Approval

☐ Approved ☐ Approved, with conditions ☐ Denied

Reason for denial	
Approved with conditions	
Signature/Date	

Planning Dept. Approval

☐ Approved ☐ Approved, with conditions ☐ Denied

Conditions / Reason for denial	
Signature/Date	