

## **BUSINESS LICENSE RENEWAL APPLICATION FOR 2025-2026**

Please return form before  $July 10^{th}$ 

## \*\*\* INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED \*\*\*

IF BUSINESS HAS CLOSED. PLEASE RETURN FORM MARKED CLOSED.

BUSINESS NAME / ADDI	s
OWNER/MANAGER:	
MAILING ADDRESS:	
BUSINESS LOCATION:	
BUSINESS DESCRIPTION:	
PHONE:	
CA SALES TAX #	
FEIN #	
	***PLEASE REFER TO ENCLOSED INSTRUCTIONS***
PI	IDE COPIES OF ALL FEDERAL, STATE, COUNTY AND LOCAL PERMITS
GROSS RECEIPTS FY 2025-26 (	(UIRED):
¢.	
\$	
nstructions for Closing of Accoun	
f you will not conduct any business	he City of Soledad during July 1, 2025, through June 30, 2026, please check the box below:
No business will be condu	l in the City of Soledad during the FY 2025-26
	d apply to operate business within the city limits of City of Soledad, and I further certify that tained in this application is true and correct, to the best of my knowledge.
	***FORM MUST BE SIGNED AND DATED***
Signature:	Date:
Print Name:	Email:

Note: Once your application renewal is processed, an invoice will be sent via email or mail.

248 Main Street, P.O. Box 156 Soledad, CA 93960 Phone: (831) 223-5000 Email: businesslicense@cityofsoledad.gov