



# City of Victorville

## Development Department

Planning • Building • Code Enforcement • Business License

### Residential Business License Requirements

14343 Civic Drive  
PO Box 5001  
Victorville, CA 92392

(760) 955-5072  
Fax (760) 269-0046  
businesslicense@  
Victorvilleca.gov

To operate within the City limits, you must first obtain a City of Victorville Business License. This checklist provides the basic requirements for obtaining a City of Victorville Business License.

#### **REQUIRED ITEMS:**

- APPROPRIATE ZONING:** Before beginning the process, make sure that your type of business is compatible with the existing zoning for your proposed site. Provide the Assessor's Parcel Number or street address of the property to the Planning Division. Contact the Planning Division at [planning@victorvilleca.gov](mailto:planning@victorvilleca.gov) or at (760) 955-5135.
- BUSINESS LICENSE:** Anyone conducting business within the Victorville city limits must obtain a business license. An application fee of \$76.00 (non-refundable) is required to process the business license application. The annual business license fees vary according to the type of business. To apply for a license or make inquiries about the business license process, contact the Business License Division at [businesslicense@victorvilleca.gov](mailto:businesslicense@victorvilleca.gov) or at (760) 955-5072.
- HOME OCCUPATION PERMIT:** Home based businesses may be approved upon application to the Planning Division, if they comply. If compliance with regulations is not met initially, an application for a Planning Commission hearing may be necessary. An application fee of \$50.00 (non-refundable) is required to process a home occupation permit application (administrative approvals), or \$200.00 for Planning Commission approvals; the Planning Division will determine which process/fees are applicable. Contact the Planning Division at [planning@victorvilleca.gov](mailto:planning@victorvilleca.gov) or at (760) 955-5135 for more information.
- WORKERS' COMPENSATION INSURANCE ACKNOWLEDGEMENT FORM:** The enclosed Official Notification Regarding Workers' Compensation Insurance Form must be completed and provided pursuant to San Bernardino County District Attorney's office.
- DEPARTMENTAL APPROVALS:** Prior to the business license being issued we will need various departmental approvals. If there will be any additional requirements, these departments will contact you directly.

#### **OTHER REQUIREMENTS IF APPLICABLE (Based on Business Type):**

- SELLER'S PERMIT:** All businesses selling tangible property at wholesale or retail in the City must contact the State Board of Equalization at (800) 400-7115 or at <http://www.boe.ca.gov/> to obtain a Seller's Permit. If you are moving a business from another area or opening a branch establishment in Victorville, please be advised that a separate permit must be issued for posting at the Victorville location.
- FICTITIOUS BUSINESS NAME STATEMENT (FBN) / CORPORATE STATUS:** If your business ownership type is Sole Proprietor, Partnership or Trust, and your business name does not include your surname(s); or if your business ownership is a Limited Liability Company or Corporation, and your business name is something other than what is listed on the Articles of Incorporation, a Fictitious Business Name Statement must be filed for the principle place of business. This statement must be recorded with the San Bernardino County Recorder's Office. Please provide a copy of your Fictitious Business Name Statement with your application. Contact the San Bernardino County Recorder's Office for more information at (855) 732-2575, [www.sbcounty.gov/arc/FbnInfo.aspx](http://www.sbcounty.gov/arc/FbnInfo.aspx), or locally at (760) 995-8065, 15900 Smoke Tree Street, Hesperia.  
If your business ownership is a Limited Liability Company or Corporation, please also provide a copy of your Articles of Incorporation with your application. For more information, contact the California Secretary of State at (916) 657-5448, [www.sos.ca.gov/business/](http://www.sos.ca.gov/business/).
- HEALTH PERMIT:** If your business is involved in the handling of food or if your business has a pool, spa or jacuzzi for public use, a copy of your Health Permit from the San Bernardino County Environmental Health Department is required with your application. For more information, contact the San Bernardino County Environmental Health Department at (800) 442-2283, 15900 Smoketree Street, Hesperia, Ca 92345, or at [www.sbcounty.gov/dph/dehs/Depts/EnvironmentalHealth/BusinessServices/applications.aspx](http://www.sbcounty.gov/dph/dehs/Depts/EnvironmentalHealth/BusinessServices/applications.aspx).
- STATE LICENSE:** If your occupation requires you to have a State license / certification, a copy of your license / certification will be required with your application. Contact the State of California Department of Consumer Affairs for more information at (800) 952-5210 or at <http://www.dca.ca.gov/licensee/index.shtml>. Please be aware that your state license may be under a different State Department; contact your specific department for more information.
- POLICE DEPARTMENT:** Police Department approval is required for all Solicitors/Peddlers, Vehicle for Hire, Service and Sales drivers and all businesses in Firearms, Pawnshops, Junk dealers, Secondhand Stores, etc. Live Scan/Fingerprinting is required and a permit issued for all businesses stated above, except for businesses in Firearms, Pawnshops, Junk dealers, Secondhand Stores, etc. Complete the related forms and submit them with your business license application. The Police Department will contact you regarding their requirements. For specific questions relating to their approval / permit process, contact the Police Department at (760) 241-2911, 14200 Amargosa Road, Victorville.

To apply for a license or make inquiries about the business license process, contact the Business License Division at:  
P: (760) 955-5072 / F: (760) 269-0046 / Email: [businesslicense@victorvilleca.gov](mailto:businesslicense@victorvilleca.gov) / Website: [www.victorvilleca.gov](http://www.victorvilleca.gov)



# City of Victorville

## Development Department

Planning ♦ Building ♦ Code Enforcement ♦ Business License

### Business License & Home Occupation Permit Application

14343 Civic Drive  
PO Box 5001  
Victorville, CA 92392

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This application must be completed in its entirety to be accepted / processed by the Development Department.

Select all that apply:  New Application  Change of Owner  Change of Ownership Type  Change of Business Address  Change of Business Name  Change of Business Type / Activity

#### General Business Information

Business Name (if DBA, use DBA): \_\_\_\_\_

Business Owner (if corporation, use corporate name): \_\_\_\_\_

Business Address including Suite #: \_\_\_\_\_  
Street Address w/Suite # City State Zip Code

Mailing Address: \_\_\_\_\_  
Street Address City State Zip Code

Phone No.: (\_\_\_\_) \_\_\_\_\_ Fax No.: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Principal Owners, Officers, Partners, Contact Person (attached additional pages if necessary):

Name Residence Street Address Title Phone Number

Name Residence Street Address Title Phone Number

Name Residence Street Address Title Phone Number

#### Fees

Please note that the both application fees must be paid when the applications are submitted. The business license annual fee must be paid prior to the issuance of the business license. Fees must be paid by check, money order or cash, either in person or via mail.

- Business License Application Fee: \$76.00 (includes mandatory \$1.00 State CASP Fee)
- Business License Annual Fee: varies based on business type
- Home Occupation Permit Application Fee: \$50.00

By signing below, I understand that this is an application ONLY and does NOT give the right to conduct business until BOTH the Home Occupation Permit AND the Business License have been approved and ISSUED.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

#### OFFICE USE ONLY

Date Rec'd:	Rec'd By:	PLN Comments:
VMC:	SIC:	
BSL App Fee: \$	BSL Annual Fee: \$	HOP App Fee: \$
<input checked="" type="checkbox"/> Rec'd: <input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> #	Total Amount Rec'd: \$
BSL#:	HOP#:	Planner:



# City of Victorville

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### Business License Application

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#### Business Operations Information

- Business Type:**
- |  |   |
|--|---|
| <input type="checkbox"/> Retail, Wholesale, Misc.        | <input type="checkbox"/> Entertainment, Amusement, Recreation                       |
| <input type="checkbox"/> Service, Misc.                  | <input type="checkbox"/> Film, Photography  |
| <input type="checkbox"/> Administrative Headquarters     | <input type="checkbox"/> Vehicles for Hire, Service, Sales                          |
| <input type="checkbox"/> Manufacturing, Warehousing      | <input type="checkbox"/> Solicitors, Peddlers                                       |
| <input type="checkbox"/> Professional, Semi-Professional | <input type="checkbox"/> Firearms, Pawnshops, Junk dealers, Secondhand Stores, etc. |
| <input type="checkbox"/> Contractors                     | <input type="checkbox"/> Massage  |
| <input type="checkbox"/> Rental Property                 | <input type="checkbox"/> Exempt   |

**Business Description** - describe business activity **IN DETAIL**, to include the following: type of structure (single family residence, apartment, etc.); type of equipment, materials and processes used; how the business is to be conducted; storage area required; any other information which you believe will help the Development Department understand the nature of your occupation): \_\_\_\_\_

Date you would like to begin in Victorville: \_\_\_\_\_ If it's a temporary event, date range: \_\_\_\_\_

Total # of Owners / Employees: \_\_\_\_\_ Total # of Business Vehicles: \_\_\_\_\_

Of those employees, # of Professionals: \_\_\_\_\_ # of Semi-Professionals: \_\_\_\_\_ # of Non-Professionals: \_\_\_\_\_

Professionals / Semi-Professionals: Federal / State / County ID / Certificate #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Does your business deal in firearms?  Y  N If so, please provide your Federal Firearms License #: \_\_\_\_\_

Rental Property Owners: # of units: \_\_\_\_\_ Is there a community room / area, pool / hot tub for public use?  Y  N

Does your business have coin operated machines?  Y  N If so, how many / locations: \_\_\_\_\_

Ownership Type:  Sole Proprietor  Partnership  Corporation  LLC  Trust  Other: \_\_\_\_\_

Please provide at least one of the following:

Federal ID #: \_\_\_\_\_ State ID #: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Sellers Permit #: \_\_\_\_\_

Contractors: Classification: \_\_\_\_\_ State ID #: \_\_\_\_\_ Expiration Date (must be active): \_\_\_\_\_

Does your business provide a food / beverage service?  Y  N If so, please describe: \_\_\_\_\_

Do you currently have a Conditional Use Permit?  Y  N If so, Case #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Notice:** Business Licenses are due prior to commencing operation. Business Licenses are annual and expire one (1) year from the month of issuance on the last day of the month, or as stated in the Victorville Municipal Code. Issuance of the Business License in no way releases the issuee from compliance with any provision of Federal, State, County and City statutes, ordinances, rules, regulations or other law, including and without limitation to zoning, building and health and safety laws. This application will be circulated to relevant Federal, State, County, City Agencies and Departments for reviews, inspections and law enforcement purposes. It shall be the responsibility of the licensee to notify the Business License Division of any changes, updates to, and/or to cancel the Business License. Failure to comply may result in penalty fees, the Business License being suspended and/or revoked. I declare under penalty of perjury that the foregoing is to the best of my knowledge and belief true and correct, that I have read the above, and understand all the conditions as stated therein.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_



# City of Victorville

## Development Department

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### Home Occupation Permit Application

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PO Box 5001  
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(760) 955-5135  
Fax (760) 269-0070  
planning@victorvilleca.gov

#### Home Occupancy Permit Requirements

In reviewing and acting upon an application for a Home Occupation Permit, the Development Department Planning Division must determine the applicant's ability to meet the following requirements:

- Possession of a business license is required.
- There shall be no exterior evidence of the conduct of a home occupation except for any signage on vehicles unless otherwise regulated by Title 16.
- A home occupation shall be conducted only within the enclosed living area of the dwelling unit or the garage without rendering the garage unusable as the required off-street parking space(s) for the dwelling unit.
- Electrical/mechanical equipment which creates visible/audible interference in radio/television receivers or causes fluctuation in line voltage outside the dwelling unit/which creates noise/odors not normally associated with residential dwelling units shall be prohibited.
- Only the residents of the dwelling unit may be engaged in the home occupation.
- To the extent that there is any sale of any service or item related to a home occupation by the permittee or seller, no transaction or delivery of the item to the buyer shall occur on or adjacent to the premises.
- There shall be no signs other than those permitted by the zone regulations.
- A home occupation shall not create greater vehicle or pedestrian traffic than normal for the district in which it is located.
- There shall be no modification to existing utility services to accommodate or service the home occupation.
- Any storage of hazardous, toxic, flammable or combustible materials or chemicals associated with the home occupation shall be allowed only if in compliance with City of Victorville standards.
- That portion of the dwelling unit occupied by certain home occupations shall be made available for an annual fire inspection to ensure compliance with applicable health and safety standards. A fee may be charged by the Fire Department for this inspection.
- No advertisement of the home occupation shall include the residential address where the home occupation is conducted.

*I have read and understand the aforementioned requirements which must be met in order for the home occupation to receive administrative approval. Subsequent operation of the home occupation in violation of the requirements would most likely result in the invalidation of the home occupation permit.*

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

#### Letter of Authorization if Applicant Other Than Property Owner

I, \_\_\_\_\_, as owner(s) of property identified as Assessor's Parcel No(s).

Property Owner(s)

\_\_\_\_\_, and/or Tract/Parcel Map \_\_\_\_\_, Parcel/Lot No. \_\_\_\_\_ do hereby authorize

\_\_\_\_\_, to represent me as agent in seeking approval of the Following project(s):

Authorized Agent

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

