City of Victorville

Development Department

Planning ◆ Building ◆ Code Enforcement ◆ **Business License** ◆ Animal Control

In-City Massage Business License Requirements

14343 Civic Drive
PO Box 5001
Victorville, CA 92392

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

BUSINESS REQUIREMENTS (all applicable documents to be COMPLETED are enclosed):

☐ **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 or at (760) 955-5135.

☐ **BUSINESS LICENSE (BSL) APPLICATION – ENCLOSED:** Anyone conducting business within Victorville city limits **must** obtain a business license. Once all approvals and required documents have been received, your business license will be issued. BSL Fee $176.92.

☐ **COMMERCIAL BUSINESSES ONLY: CERTIFICATE OF OCCUPANCY (COFO) APPLICATION – COMPLETE ONLINE OR IN-PERSON:** All commercial businesses within Victorville city limits **must** obtain a Certificate of Occupancy. The Certificate of Occupancy will be issued once all approvals have been received, and will be issued with the business license. COFO Fee $52.40. For more information, contact the Building Division in-person at City Hall, via email at inspection@victorvilleca.gov or by phone at (760) 955-5100.

OR

☐ **HOME BUSINESSES ONLY: HOME OCCUPATION PERMIT (HOP) APPLICATION - ENCLOSED:** All home based businesses within Victorville city limits **must** obtain a Home Occupation Permit. The Home Occupation Permit will be issued once all approvals have been received, and will be issued with the business license. HOP Fee $59.39. For more information, contact the Planning Division in-person at City Hall, via email at planning@victorvilleca.gov or by phone at (760) 955-5135.

☐ **FIRE OPERATIONAL PERMIT APPLICATION – ENCLOSED:** All commercial businesses and some residential businesses within Victorville city limits **must** obtain a Fire Operational Permit. The Fire Operational Permit will be issued once all approvals have been received, and will be issued with the business license. Fees vary based on square footage and business type. For more information, contact the Community Risk Reduction Division in-person at City Hall, via email at fireprevention@victorvilleca.gov or by phone at (760) 955-5227.

☐ **FOOD BUSINESSES ONLY: GREASE INTERCEPTOR / TRAP PERMIT (FOGS) APPLICATION:** All businesses handling food/beverages require a Grease Interceptor/Trap Permit. The FOGS Permit will be issued once all approvals have been received, and will be issued with the business license. FOGS Fee $52.40 (trap) / $83.84 (interceptor). For more information, contact the Code Enforcement Division in-person at City Hall, via email at enforcement@victorvilleca.gov or by phone at (760) 955-5104.

OTHER REQUIREMENTS IF APPLICABLE (provide a COPY of applicable documents):

☐ **STATE LICENSE:** You must hold a valid State License for all masseuses employed by your business, as well as an Establishment License. A copy of these documents must be provided with your application. For more information, contact the State of California Massage Therapy Council at (916) 669-5336 or at http://www.camtc.org/.

☐ **MASSEUSE LIST:** Please provide the name(s) of all State licensed masseuses employed by the business.

☐ **FICTITIOUS BUSINESS NAME STATEMENT (FBN) / CORPORATE STATUS:** If your business ownership type is Sole Proprietor (individual), Partnership (2 or more owners) or Trust, and your business name does not include your surnames (last names); 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 copy of your Fictitious Business Name Statement is required (DBA - doing business as). For more information, contact the San Bernardino County Recorder's Office at (760) 995-8065, 15900 Smoke Tree Street, Hesperia or at www.sbcounty.gov/arc/FbnInfo.aspx.
If your business ownership is a Limited Liability Company or Corporation, a copy of the Articles of Incorporation is required. For more information, contact the California Secretary of State at (916) 657-5448, or at www.sos.ca.gov/business/.

☐ **SELLER'S PERMIT:** If your business is selling tangible property at wholesale or retail prices, a copy of your Seller's Permit is required. Please be aware that the Seller's Permit must have the Victorville location for posting at the location. For more information, contact the State Board of Equalization at (800) 400-7115 or at www.boe.ca.gov/.

☐ **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 is required. For more information, contact the San Bernardino County Health Department at (800) 442-2283, 15900 Smoketree Street, Hesperia, Ca 92345, or at www.sbcounty.gov/dph/dehs/Depts/EnvironmentalHealth/BusinessServices/applications.aspx.

IMPORTANT INFORMATION:

- Incomplete applications will **not** be accepted. Fees must be received at the time of application submission.
- All payment types accepted in-person; check or money order accepted via mail (payable to the City of Victorville); online payments accepted – see attached instructions (last page of packet).
- It takes time to process the business license application (2 – 4 weeks minimum); therefore, you may submit the application while you are in the process of obtaining the applicable documents required. Required documents can be submitted via email, fax, mail or in person.
- If any of the requirements have not been met, notification will be sent out via mail of the remaining requirements to be met.

City of Victorville

Development Department

Planning • Building • Code Enforcement • **Business License**

In-City Business License Application, Page 1 of 2

14343 Civic Drive
PO Box 5001
Victorville, CA 92392

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

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

Select all that apply:

- ❑ New Application/Business
- ❑ Change of Owner
- ❑ Change of Ownership Type
- ❑ Change of Business Name
- ❑ Change of Business Address
- ❑ Change of Business Type / Activity /Use

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 Title Phone Number

_____
Name Title Phone Number

_____
Name Title Phone Number

Fees

Please note that the fees must be paid when the application is submitted.
Fees pay all regulatory fees associated with processing the Business License.
Home Occupation Permit (HOP), if applicable, is a one-time fee.
Certificate of Occupancy(COFO), if applicable, is a one-time fee and must be applied/paid for online or in-person.
Fire Inspection & Operational Permit, if applicable, is an annual fee that will be billed with your business license renewal.
All payment types accepted in person. Check or money order accepted by mail.

By signing below, I understand that this is an application ONLY and does NOT give the right to conduct business until ALL the applicable Permits, Certificates, etc. have been approved and issued, AND the Business License have been approved and ISSUED.

Signature: _____ Printed Name: _____ Date: _____

OFFICE USE ONLY

Date Rec'd:	Rec'd By:	
VMC:	NAICS:	
Total Fees Due:	OCC - HOP - N/A (circle one)	
✓ Rec'd: ❑ Y ❑ N ✓ #:	Total Amount Rec'd: $	
BSL#:		

City of Victorville

Development Department

Planning • Building • Code Enforcement • Business License

Business License Application, Page 2 of 2

14343 Civic Drive
PO Box 5001
Victorville, CA 92392

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

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

Business Operations Information

Business Type: ❑ Retail ❑ Service / Delivery ❑ Administrative ❑ Manufacturing ❑ Professional ❑ Contractor ❑ Entertainment / Amusement ❑ Vehicle for Hire ❑ Solicitor/Peddler ❑ Massage ❑ Exempt

Business Description - describe business activity **IN DETAIL**, to include the following: type of business, how the business is to be conducted, type of structure (single family residence, apartment, etc.); type of items, merchandise, equipment, materials and processes used; if a storage area required and where it is located; 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:_____ Of those employees, # of Professionals:_____ Total # of Business Vehicles:_____

Ownership Type: ❑ Sole Proprietor (Individual) ❑ Partnership (2 or more owners) ❑ Corporation ❑ LLC ❑ Trust

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):_____

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: _____

- **If your business address is at a commercial location, complete the Certificate of Occupancy Application with the Building Division (In-person or online through the Citizen Access Portal on the City's website).**
- **All businesses must complete Fire Inspection & Operational Permit Application enclosed in this packet.**
- **If your business address is at a residential location, complete the Home Occupation Permit Application enclosed in this packet.**
- **If your business handles food/beverages, complete the Fats, Oils and Grease (FOGS) Permit Application enclosed in this packet.**

City of Victorville

Development Department

Planning • Building • Code Enforcement • Business License

Fire Inspection & Operational Permit Application

14343 Civic Drive
PO Box 5001
Victorville, CA 92392

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

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

Commercial Businesses:
Is your business sharing space with another business in the exact same location (same suite or unit)? ☐ Y ☐ N
If Yes, provide other business name: _____

If you are sharing space, you do not need to complete the rest of this application page.
If you are not sharing space, you must complete the rest of this application page.

Residential Businesses: You must complete the rest of this application page.

Facility Size (In square feet): _____

Fire Annual Operational Permit Information

Low Hazard: ☐ None of the Below

☐ Automobile Wrecking Yards ☐ Cellulose Nitrate Film ☐ Open Flames and Candles ☐ Places of Assembly 50-299

Medium Hazard: ☐ None of the Below

☐ Carbon Dioxide Enrichment Systems
☐ Carbon Dioxide Systems in Beverage Dispensing
☐ Fixed Hood & Duct Extinguishing Systems
☐ Liquid or Gas Fuel Equipment in Assembly Buildings
☐ Places of Assembly 300-999 Occupants
☐ Storage or Scrap Tires & Tire Byproducts
☐ Wood, Manure, & Organic Product Storage
☐ Covered and Open Mall Buildings
☐ Dry Cleaning
☐ Lumber Yards & Wood Working
☐ Motor Vehicle Fuel Dispensing
☐ Production Facilities
☐ Rooftop Heliports
☐ Combustible Fibers
☐ Industrial Ovens
☐ Misc. Combustible Storage
☐ Pyroxylin Plastics
☐ Refrigeration Equipment
☐ Waste Handling

High Hazard: ☐ None of the Below

☐ Aerosol Products
☐ Combustible Dust Producing Operations
☐ Cutting & Welding
☐ High-Piled Combustible Storage
☐ Liquified Petroleum Gases
☐ Pallet Yards
☐ Repair Garages
☐ Aviation Facilities
☐ Compressed Gas
☐ Flammable & Combustible Liquids
☐ Hot Works Operations
☐ Magnesium
☐ Places of Assembly 1,000+ Occupants
☐ Spraying or Dipping
☐ Battery Systems
☐ Cryogenic Fluids
☐ Explosives
☐ HPM Facilities
☐ Organic Coatings
☐ Plant Extraction Systems
☐ Tire Rebuilding Plants

Occupancies Requiring Mandated Inspections

State Mandated: ☐ None of the Below

☐ Detention Facility (Group 1-3)
☐ Residential Care Facility (Group R-2.1)
☐ Family Day Care – Large & Small (Group R-3)
☐ Health Care Facilities/Nursing/Detox Centers (I-2)
☐ Organized Camps (Group C)
☐ Residential Care Facility (Group R-3.1)
☐ Day Care Facility (Group E)
☐ Multi-Family Housing (Group R-1/R-2)
Multi-Family Unit Count _____
☐ Public or Private Schools (Group E)
☐ Residential Care Facility (Group 4)
☐ Day Care Facility (Group 1-4)
☐ High Rise

Fire Inspection and Operational Permit Fee Schedules

All commercial businesses located in the City of Victorville are assessed an annual inspection Fee based on the square foot of the building that is occupied:

Square Foot	Amount
0 – 5,000 sq. ft.	$170.00
5,001 – 10,000 sq. ft.	$222.00
10,001 – 50,000 sq. ft.	$275.00
50,001 – 100,000 sq. ft.	$419.00
100,001 – 500,000 sq. ft.	$534.00
500,001 – 1,000,000 sq. ft.	$739.00
> 1,000,000 sq. ft.	$1,123.00

In addition to the annual inspection fee, any business operations that are considered hazardous, simply as a result of the normal business operation and use of the building, will also receive inspection for those hazards and be issued an annual operating permit.
Following is a sample of some common operational permits:

Hazard Type	Amount
Low Hazard i.e. Automobile Wrecking Yards, Open Flames & Candles, Places of Assembly 50-299	$35.00
Medium Hazard i.e. Dry Cleaning, Fixed Hood & Duct Extinguishing Systems, Refrigeration Equipment	$70.00
High Hazard i.e. Aviation Facilities, High-Piled Combustible Storage, Places of Assembly 1,000+	$105.00

To view a comprehensive fee schedule, visit our website: www.victorvilleca.gov/FPB

Victorville Fire Department
Fire Prevention Bureau and Community Risk Reduction Division
14343 Civic Drive
Victorville, Ca 92392
P: 760.955.5227
fireprevention@victorvilleca.gov
www.victorvilleca.gov/FPB

City of Victorville

Development Department

Planning • Building • Code Enforcement • **Business License**

Home Occupation Permit Application, Page 1 of 1

14343 Civic Drive
PO Box 5001
Victorville, CA 92392

(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: _____

City of Victorville

Development Department

Planning • Building • **Code Enforcement** • Business License

14343 Civic Drive
PO Box 5001
Victorville, CA 92393-5001
(760) 955-5104
Fax (760) 269-0072
inspection@ci.victorville.ca.us

GREASE INTERCEPTOR APPLICATION

Food establishments engaged in preparing food for consumption by the public desiring to discharge grease or wastewater which might include grease, into a private or public sewer shall obtain a permit to discharge from the Building Official known as a food establishment grease interceptor permit.

FOGS#: _____ **Service Frequency**_____**(days)**

Please mark all that apply to your business:

- ❑ **New Business**
- ❑ **Newly Constructed Building**
- ❑ **Change of Address**
- ❑ **Change in Business Name**
- ❑ **Change in Business Owner**
- ❑ **Request to Change Frequency of Service**

Indicate your grease containment system type currently in place:

- ❑ Grease Interceptor ($83.84 annual) Capacity (gallons)_____
- ❑ Grease Trap ($52.40 annual) Size (pounds)_____

Business Name: _____

Business Address: _____ **Suite No.:** _____

Business Owner (if corporate, use corporate name): _____

Mailing Address: _____
Street Address City State Zip Code

24 hour Emergency Phone No.: _____**Email Address:** _____

ACKNOWLEDGE TO THE FOLLOWING REQUIREMENTS:

1. Business acknowledges service frequency and will ensure timely FOG service reports to Code Enforcement._____(initial)
2. Business will ensure interceptor/ trap is in good working order at all times. _____(initial)
3. Business is aware that failure to provide regular and timely proof of interceptor/ trap maintenance service may result in penalty assessments or sewer system disconnection. _____(initial)
4. Business must have a 24 hour contact or service to respond to FOG overflow, clean up or repairs. _____(initial)
5. Use of food grinders or additives to emulsify or chemically treat FOG is prohibited. _____(initial)
6. Disposal of waste cooking oil into plumbing system drainage pipes is prohibited. _____(initial)
7. All drainage pipes in food preparation area must have a drain screen._____(initial)
8. The business must establish and maintain employee best management practices when handling FOG such as: dry pot wiping prior to washing, proper disposal of cooking oil, maintenance of kitchen exhaust filters, proper disposal of food waste and solids in plastic bags. _____(initial)

Notice:

1. This is an APPLICATION FOR A GREASE INTERCEPTOR OR GREASE TRAP PERMIT and does not give the right to conduct business or make alterations to the structure. (Alterations require a permit).
2. A City Business License and Certificate of Occupancy is required.
3. A Grease Trap Service Manifest is required to be submitted to the Code Enforcement division upon servicing the interceptor or grease trap.
4. It is the business owner's responsibility to ensure the grease service manifests are submitted to the City to ensure compliance.
5. The business owner shall allow City personnel access to inspect the grease trap or interceptors for service and equipment maintenance standards
6. The service frequency will be every 90 days initially for every new permit and at the discretion of City personnel. Request for a change in service frequency requires a written recommendation from the servicing provider.

City of Victorville

Development Department

Planning • Building • Code Enforcement • **Business License**

List of Masseuses Form

14343 Civic Drive
PO Box 5001
Victorville, CA 92392

(760) 955-5072
Fax (760) 269-0046
businesslicense@ci.victorville.ca.us

Provide the information below for each Masseuse intended to operate in this business.

This form is to be filled out/signed by the Business Owner Only.

Business Name:_____

Business Owner:_____

Current Masseuses:

Name:_____ DOB:_____ Phone:_____

Name:_____ DOB:_____ Phone:_____

Name:_____ DOB:_____ Phone:_____

Name:_____ DOB:_____ Phone:_____

Name:_____ DOB:_____ Phone:_____

Add new Masseuses:

Name:_____ DOB:_____ Phone:_____

Name:_____ DOB:_____ Phone:_____

Remove Masseuses:

Name:_____ DOB:_____ Phone:_____

Name:_____ DOB:_____ Phone:_____

Vehicles (if applicable):

Make:_____ Model:_____ Year:____ License #:_____VIN:_____

Make:_____ Model:_____ Year:____ License #:_____VIN:_____

Make:_____ Model:_____ Year:____ License #:_____VIN:_____

Make:_____ Model:_____ Year:____ License #:_____VIN:_____

Make:_____ Model:_____ Year:____ License #:_____VIN:_____

I declare under penalty of perjury that the foregoing is to the best of my knowledge and belief true and correct.

_____ _____ _____

Business Owner Signature Print Name Date