



Financial Services

415 Diamond Street, P.O. Box 270
Redondo Beach, California 90277-0270
www.redondo.org

Phone: 310 318-0683
Fax: 310 937-6666

**APPLICATION FOR WAIVER OF BUSINESS LICENSE TAX
CITY OF REDONDO BEACH
415 DIAMOND STREET REDONDO BEACH, CA 90277
PHONE: (310) 318-0603 EMAIL: BLMAIL@REDONDO.ORG**

Pursuant to Section 6-1.08(c) of the Redondo Beach Municipal Code

Complete and return this application.

Section 1: Applicant Information

Organization or Individual Business Name: BIH LLC

Telephone: 605-933-9873

Organization or Individual Business Address: 6677 Santa Monica Blvd, Unit 4501, Los Angeles
CA 90038

Mailing Address: Same as above
(If different from Organization or Individual Business Address)

Applicant's Name: Kishan Chavan

Telephone: 605-933-9873

Applicant's Address: Same as Above

Applicant's Relationship to Organization or Individual Business: Owner

Email Address: info@bihevents.com

Describe Business or Activity for Which Waiver Is Requested: Indian Cultural event of Holi
with Music & Colors

Section 2: Waiver Request Statement

I request a waiver from the business license requirements as specified in Redondo Beach Municipal Code 6-1.08(c).



Financial Services

415 Diamond Street, P.O. Box 270
Redondo Beach, California 90277-0270
www.redondo.org

Phone: 310 318-0683
Fax: 310 937-6666

Section 3: Community Benefit Overview

Describe how your business or organization benefits the community, including charitable activities, community service programs, educational initiatives, and job fairs. Attach additional documentation if needed.

By hosting the Holi event at Redondo Beach, your organization not only provides a unique and fun experience for the community but also fosters a sense of connection, cultural appreciation, and social responsibility. The event is a celebration that benefits both the attendees and the broader community through charitable donations, volunteer programs, cultural education, and job creation.

Section 4: Compliance with all Laws

I shall comply with all applicable federal, state, and local laws, ordinances, and regulations related to this application.

Section 5: Supporting Documentation

Include any relevant supporting documents, such as evidence of business ownership or position, proof of community recognition, letters of support, or documentation of community benefits. If a food vendor, please provide a copy of the Public Health Permit or License, evidencing certification that the vendor is in compliance with the Los Angeles County Department of Public Health requirements.

Section 6: Duration of the Business License Waiver

Any business license waiver approved by the City Council pursuant to this application shall only be for a short term, extending from 03/15/2025 to 03/16/2025.

Section 7: Signature and Acknowledgment

I declare under penalty of perjury that I am authorized to make this statement and that the information provided is complete and accurate to the best of my knowledge. I understand the City Council will make the final decision on this waiver request.

Signature: Kishan C

Print Name: Kishan Chavan

Title: Owner

Date: 02/13/2025