



Financial Services

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## APPLICATION OR WAIVER OF BUSINESS LICENSE TAX

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

### Instructions

- **Complete and return this application** to [blmail@redondo.org](mailto:blmail@redondo.org)
- **Please submit** waiver request **four weeks prior to event date** to provide for sufficient time to place on the City Council Agenda for consideration.
- Please contact [blmail@redondo.org](mailto:blmail@redondo.org) or at the phone number listed in the form heading with questions.

### Section 1: Applicant Information

Name of Event: \_\_\_\_\_

Organization or Individual Business Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Organization or Individual Business Address: \_\_\_\_\_

\_\_\_\_\_  
Mailing Address \_\_\_\_\_

(If Different from Organization or Individual Business Address)

Applicant's Name \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Relationship to Organization or Individual Business: \_\_\_\_\_

Email Address: \_\_\_\_\_

Describe Business or Activity for which wavier is requested: \_\_\_\_\_

\_\_\_\_\_  
Date(s) of the Event: \_\_\_\_\_

Event Hours: \_\_\_\_\_

Location Address of the Event: \_\_\_\_\_

Organization or Individual Business website: \_\_\_\_\_



