

Financial Services

415 Diamond Street, P.O Box 270
Redondo Beach, California 90277-0270
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Fax: 310-697-3091

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
- **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 or at the phone number listed in the form heading with questions.

Section 1: Applicant Information

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 waiver is requested: _____

Date(s) of the Event: _____

Event Hours: _____

Location Address of the Event: _____

Organization or Individual Business website: _____

Please list below all the vendors that will participating in the event:

Crafting Vendors:

[illegible]

Food Booth Vendors (non food truck):

(Please note these vendors will be still be required to provide their Health Permit and Food Handler Certificates prior to event)

[illegible]

Food Trucks:

(Please note these vendors will be still be required to provide their Health Permit and Food Handler Certificates prior to event)

[illegible]

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).

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 as needed.

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 City Council pursuant to this application shall only be for a short term, extending from _____ to _____.

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: _____

Print Name: _____

Title: _____

Date: _____