



Financial Services

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

Phone 310 319-0683
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: Christopher YATES

Telephone: 323 202 6463

Organization or Individual Business Address: 2909 E 4th St,
Long Beach, Ca 90814.

Mailing Address: _____
(If different from Organization or Individual Business Address)

Applicant's Name: Christopher YATES

Telephone: 323 202 6463

Applicant's Address: 2909 E 4th St, Long Beach Ca 90814

Applicant's Relationship to Organization or Individual Business: Owner

Email Address: redjuggle@hotmail.com

Describe Business or Activity for Which Waiver Is Requested: One time performance for

City Birthday celebration April 25th '26.

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).



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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.

This April 25th performance at the Redondo Beach Historical Museum will aid in the celebration of the city Birthday event. It is a one time performance

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 April 24th to April 26th 2026.

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: [Handwritten Signature]

Print Name: Christopher Yates

Title: Owner / Performer

Date: 3/19/26