



**BUSINESS PERMIT APPLICATION FEE: \$70**

**City of Claremont**  
 Department of Community Development  
 207 Harvard Ave., Claremont, CA 91711  
 PH. (909) 399-5470

- New Application
- Change of Ownership
- Change of Location
- Change Nature of Business
- Message Establishment**

**BUSINESS INFORMATION (please print or type)**

Business Name:		Business Phone:	
Business Address:		Email Address:	
Mailing Address:			
Business Start Date:		Circle Floor Level: Basement / 1st Floor / 2nd Floor / 3rd Floor	
Floor Area Occupied (ft. <sup>2</sup> ):	Hours of Operation (days/hours):	Number of Employees:	
Resale No.:	State License No.:	Federal License No.:	
Former Use of This Address:			
Description of Business (be very specific): _____ _____ _____			

**OWNER INFORMATION (please print or type)**

Name: _____ Title: _____ <small>Last First Middle (CEO, Owner, President, Partner, etc.)</small>	
Residence Address: _____	
Residence Phone No.:	Other Phone:
Name: _____ Title: _____ <small>Last First Middle (CEO, Owner, President, Partner, etc.)</small>	
Residence Address: _____	
Residence Phone No.:	Other Phone:

**IMPORTANT: READ AND SIGN BELOW**

**VALIDATION**

All businesses must comply with Claremont's Municipal Code requirements. The proposed business shall not conflict with any State or Federal laws. Completing and filing this business permit application with the City of Claremont, and paying the required fees, does not constitute approval of the proposed business at the location indicated on this application. Approvals from the Planning and Building Divisions, as well as the Police and Fire Departments, are required before the City will issue a business permit. The City will notify you of its decision in writing. In the event that the business changes ownership, location or nature of business, the Claremont Municipal Code (Section 5.20.090) requires that a new application be filed and the appropriate fees paid to the City of Claremont. The operation of a business prior to receiving the City's written approval is illegal and done at the business owner's risk. Sign permits are required for all signs.

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Date of Application

**ZONING:** \_\_\_\_\_

**FOR CITY USE ONLY**

**PLANNING DIVISION**

Approval

Conditional Approval

Denial

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**BUILDING AND SAFETY DIVISION**

Approval

Conditional Approval

Denial

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**POLICE DEPARTMENT - Required for all Massage Establishments**

Approval

Conditional Approval

Denial

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FIRE DEPARTMENT**

Approval

Conditional Approval

Denial

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_