

Town of Fort Jones
11960 East Street
P.O. Box 40
Fort Jones, CA 96032
(530) 468-2281
FAX (530) 468-2598



BUSINESS LICENSE APPLICATION

Business Startup Date: _____

Business Name: _____

Business Location: _____

Business Phone: _____

Business Mailing Address: _____

Nature of Business/Brief Description of Services Provided: _____

Business Owner Name and Address:

Phone: _____ Email Address: _____

Signature _____ Date: _____

See on back: License Fee per Year

Day License \$5 ()

Annual License ()

Office Use Only:

Lic# _____ Amount Paid: _____ Check #: _____ Date: _____

The license fees are as follows:

Average Gross Sales Per Month		License Fee Per Year
Less than	\$500	\$12
500 to	\$1,500	\$20
1500 to	\$3,000	\$27.50
3000 to	\$5,000	\$35
5000 to	\$8,000	\$45
8000 to	\$13,000	\$60
13,000 to	\$20,000	\$180

If the average gross sales exceeded twenty thousand (\$20,000) per month, an additional license tax of five dollars (\$5.00) shall be charged for each two thousand dollars (\$2,000).

Please return your fee to Town of Fort Jones, P.O. Box 40 Fort Jones CA 96032