

# CITY OF NATIONAL CITY

Department of Finance  
1243 National City Blvd  
National City, CA 91950 (619) 336-4341

## APPLICATION FOR BUSINESS CLEARANCE

COMPLETE ALL SECTIONS. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.  
PLEASE TYPE OR PRINT CLEARLY.

BUSINESS NAME: \_\_\_\_\_ BUSINESS OPENING DATE: \_\_\_\_\_  
BUSINESS ADDRESS: \_\_\_\_\_ SUITE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
BUSINESS TYPE (CHECK ONE): WHOLESALE RETAIL SERVICE MANUFACTURING CONSTRUCTION  
BUSINESS DESCRIPTION. LIST ANY PRODUCTS INVOLVED. \_\_\_\_\_

COOKING APPLIANCES ON SITE? YES NO FLAMABLES ON SITE? YES NO  
HAZARDOUS MATERIALS? YES NO SPRAY PAINTING? YES NO  
PERSON TO CONTACT FOR INSPECTION: \_\_\_\_\_ PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

APPLICANT MAILING ADDRESS (IF DIFFERENT FROM ABOVE): \_\_\_\_\_

REAL ESTATE PROPERTY OWNER : \_\_\_\_\_ PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

WHAT TYPE OF BUSINESS PREVIOUSLY WAS AT THE LOCATION? \_\_\_\_\_

TYPE OF APPLICATION: NEW RELOCATION WITHIN THE CITY MULTI-LOCATION  
CHANGE OF OWNERSHIP EXISTING BUSINESS

### FOR OFFICE USE ONLY

#### PLANNING DEPARTMENT

ZONE/USE GROUP: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

STIPULATIONS / CORRECTIONS / IMPROVEMENTS: YES NO COPY ATTACHED

COMMENTS: \_\_\_\_\_

#### FIRE DEPARTMENT

SPRINKLERS REQUIRED: \_\_\_\_\_ FIRE EXTINGUISHERS: \_\_\_\_\_

EXITING: \_\_\_\_\_ SEPARATE PERMIT REQUIRED: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

#### BUILDING AND SAFETY DEPARTMENT

USE CLASS: \_\_\_\_\_ OCCUPANCY: \_\_\_\_\_ FLOOR AREA: \_\_\_\_\_ TYPE OF CONSTRUCTION: \_\_\_\_\_

BLDG PERMIT #: \_\_\_\_\_ DATE: \_\_\_\_\_ PREVIOUS OCCUPANCY PERMIT DATE: \_\_\_\_\_ USE: \_\_\_\_\_

CERTIFICATE OF OCCUPANCY ON FILE: \_\_\_\_\_ CORRECTIONS REQUIRED PRIOR TO APPROVAL: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ COMMENTS: \_\_\_\_\_

H/O BUSINESS LICENSE

DATE PAID: \_\_\_\_\_ TR#: \_\_\_\_\_ AMOUNT PAID: \_\_\_\_\_ B/N #: \_\_\_\_\_ REV & RECOV INITIALS: \_\_\_\_\_