

# CITY OF NATIONAL CITY

Finance Department-Business License  
1243 National City Blvd.  
NATIONAL CITY, CA 91950 (619) 336-4330



## APPLICATION FOR ZONING CLEARANCE

(REQUIRED PRIOR TO BUSINESS LICENSE ISSUANCE)

COMPLETE ALL AREAS OF INFORMATION / INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.  
PLEASE TYPE OR PRINT NEATLY.

BUSINESS NAME: \_\_\_\_\_ BUSINESS OPENING DATE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ SUITE # \_\_\_\_\_ PHONE #: \_\_\_\_\_

BUSINESS TYPE (MARK ONE):  COMMERCIAL  INDUSTRIAL  RESIDENTIAL  OFFICE  MEDICAL

BUILDING SQUARE FOOTAGE (applicable to commercial addresses): \_\_\_\_\_ sq. ft.

TOTAL NO. OF BEDS (applicable to Health Care Facilities): \_\_\_\_\_

TOTAL NO. OF UNITS (applicable to apartment bldgs., hotels, etc.): \_\_\_\_\_

Describe business fully. List any products involved. \_\_\_\_\_

WHAT TYPE OF BUSINESS WAS AT THE LOCATION MORE RECENTLY? \_\_\_\_\_

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

EXISTING BUSINESS COOKING APPLIANCES ON SITE? YES/NO FLAMMABLES 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: \_\_\_\_\_

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

LANDLORD CONTACT (IF DIFFERENT THAN OWNER) : \_\_\_\_\_ PHONE #: \_\_\_\_\_

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

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

### FOR OFFICE USE ONLY

#### PLANNING DEPARTMENT

ZONE \_\_\_\_\_ NONCONFORMING USE? YES/NO APPROVED BY \_\_\_\_\_ DATE: \_\_\_\_\_

- |  |  |   |  |
|--|--|---|--|
| Commercial                               | <input type="checkbox"/> CONVENIENCE GOODS     | Industrial                                | Other                                    |
| <input type="checkbox"/> AUTO SALES      | <input type="checkbox"/> CAR WASH              | <input type="checkbox"/> STORAGE          | <input type="checkbox"/> PUBLIC ASSEMBLY |
| <input type="checkbox"/> AUTO REPAIR     |  | <input type="checkbox"/> ASSEMBLY         | <input type="checkbox"/> ENTERTAINMENT   |
| <input type="checkbox"/> AUTO BODY/PAINT | Residential                                    | <input type="checkbox"/> WHOLESALE        | <input type="checkbox"/> RECYCLING       |
| <input type="checkbox"/> RESTAURANT      | <input type="checkbox"/> RESIDENTIAL RENTAL    | <input type="checkbox"/> EQUIPMENT RENTAL | <input type="checkbox"/> RECREATION      |
| <input type="checkbox"/> SMALL BREWERY   | <input type="checkbox"/> CHILD DAY CARE        | <input type="checkbox"/> MANUFACTURING    | <input type="checkbox"/> EDUCATION       |
| <input type="checkbox"/> TASTING ROOM    | <input type="checkbox"/> LARGE FAMILY DAY CARE | <input type="checkbox"/> FOOD PROCESSING  | <input type="checkbox"/> BAR             |
| <input type="checkbox"/> OFFICE          | <input type="checkbox"/> INDEPENDENT LIVING    | <input type="checkbox"/> LABORATORY       | <input type="checkbox"/> HOSPITAL        |
| <input type="checkbox"/> MEDICAL         | <input type="checkbox"/> APARTMENT MGMT        | <input type="checkbox"/> LARGE BREWERY    |  |
| <input type="checkbox"/> RETAIL SALES    | <input type="checkbox"/> COTTAGE INDUSTRY      | <input type="checkbox"/> WAREHOUSE        |  |
| <input type="checkbox"/> SERVICE         | <input type="checkbox"/> HOME OCCUPATION       | <input type="checkbox"/> DISTRIBUTION     |  |

STIPULATIONS / CORRECTIONS / IMPROVEMENTS: YES / NO COPY ATTACHED

COMMENTS \_\_\_\_\_

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**FIRE DEPARTMENT**

INSPECTION DATE \_\_\_\_\_ OCCUPANCY TYPE \_\_\_\_\_ QUARTER \_\_\_\_\_

SEPARATE PERMITS REQUIRED \_\_\_\_\_ SQ. FT. \_\_\_\_\_ # OF UNITS \_\_\_\_\_ # OF BEDS \_\_\_\_\_

APPROVED BY \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_

COMMENTS

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**CODE ENFORCEMENT/BUILDING DEPARTMENT**

APPROVED BY \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_

COMMENTS

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PROCESS:

1. SUBMIT COMPLETE APPLICATION TO FINANCE DEPARTMENT.
2. APPLICATION REVIEWED BY PLANNING DEPARTMENT AND FORWARDED TO FIRE DEPARTMENT.
3. APPLICATION REVIEWED BY FIRE DEPARTMENT. SITE INSPECTION REQUIRED.
4. IF CONSTRUCTION OR OCCUPANCY ISSUES REQUIRE ADDITIONAL REVIEW, THE BUILDING DEPARTMENT AND/OR CODE ENFORCEMENT DIVISIONS WILL REVIEW.
5. IF ALL REVIEWING DEPARTMENTS APPROVE APPLICATION, FINANCE DEPARTMENT ISSUES BUSINESS LICENSE.
6. **BUSINESS LICENSES REQUIRE ANNUAL RENEWAL. FAILURE TO MAINTAIN A BUSINESS LICENSE MAY JEOPARDIZE FUTURE PROPERTY USE.**

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CONTACT:

FINANCE DEPARTMENT

(619) 336-4330

[finance@nationalcityca.gov](mailto:finance@nationalcityca.gov)

Lower Level

PLANNING DEPARTMENT

(619) 336-4310

[planning@nationalcityca.gov](mailto:planning@nationalcityca.gov)

Main Floor

FIRE DEPARTMENT

(619) 336-4550

[fire@nationalcityca.gov](mailto:fire@nationalcityca.gov)

Main Floor

BUILDING DEPARTMENT

(619) 336-4210

[building@nationalcityca.gov](mailto:building@nationalcityca.gov)

Main Floor

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***We Pledge to Provide...***

***Commitment***

We strive for excellence, as we serve the public and each other with integrity, compassion, responsiveness, and professionalism.

***Customer Service***

We provide excellent service to residents, businesses, visitors, and colleagues.

***Courtesy***

We treat everyone with dignity and respect.

***Communication***

We communicate openly, honestly, and with clear, consistent messages.

***Collaboration***

We work to achieve common goals and value our differences.