



**Monterey Regional Airport**  
**Business License Application 2024**  
**Contractor, Local, Aviation and Commercial Businesses**  
Administrative Services Department  
200 Fred Kane Drive, Suite 200, Monterey CA 93940

**EFFECTIVE DATE:** \_\_\_\_\_

**BUSINESS NAME:** \_\_\_\_\_

(Business License Certificate can accommodate up to 30 characters and spaces)

**(DBA):** \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_

Street Suite / Apt # City State Zip  
(List address where each individual consents to receive service of process per AB2184, Sec. 16000.1(a) (2) and 16100.1(a) (2))

**MAILING ADDRESS:** \_\_\_\_\_

Street Suite / Apt # City State Zip

**CONTACT NAME:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_

**DESCRIPTION OF BUSINESS:** \_\_\_\_\_

**Emergency Contact Name/Number:** \_\_\_\_\_

**NOT PUBLIC INFORMATION**

**OWNER'S NAME:** \_\_\_\_\_

**DRIVER'S LICENSE # OR OTHER ID:** \_\_\_\_\_

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

**PHONE NUMBER:** \_\_\_\_\_

**TAX INFORMATION:**

Sole Ownership:  Partnership:  Corporation:  LLC:  Non Profit/Exempt:

**FED TAX ID:** \_\_\_\_\_ **STATE TAX ID:** \_\_\_\_\_

**STATE BOARD OF EQUALIZATION # (Resale Permit):** \_\_\_\_\_

**STATE LICENSED CONTRACTOR INFORMATION:**

Contractor's License #: \_\_\_\_\_ Expiration: \_\_\_\_\_

State Contractor's Classification Code: \_\_\_\_\_ Worker's Comp Carrier: \_\_\_\_\_

**Worker's Comp Policy Number:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_

I certify under penalty of perjury the above information to be true and correct. I understand that it is my responsibility to be in compliance with the requirements of the MPAD and any other governmental agencies affecting operation of this business. I understand that the Planning Department must be contacted prior to the beginning of any improvements to my leasehold.

**SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Office Use Only**

**Approved By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Verified By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Verification of Contractor's License:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **ATTENTION LICENSE APPLICANTS:**

Thank you for doing business at the Monterey Regional Airport! **All businesses** inside the Monterey Peninsula Airport District (MPAD) boundaries must turn in their completed application to the Administrative Services Department at:

- 200 Fred Kane Drive, Suite 200, Monterey CA 93940

**Renewal Process:** The 2024 Business License Fee is \$500 per business. Business license shall be valid from January 1 through December 31 of each year. The business license shall be renewed annually by the filing of a renewal application on a form provided by the Airport, accompanied by payment of the appropriate fee. You will receive your license after all fees have been paid.

A late fee charge of five percent (5%) will be assessed for any applications not received by January 31, 2024. Any unpaid amount shall bear interest from the due date to the date of payment at the compounded rate of one percent per month after 10 days from the due date (5% late plus 1% interest/month)

**New/Change of Ownership:** A new application must be submitted whenever there is a change in ownership or business name change. Please notify this office immediately if there are any changes in the mailing address or operating status of your business.

## **BUSINESS LICENSE – DOCUMENTATION LIST**

### **PLEASE ATTACH COPIES OF THE ITEMS BELOW WITH YOUR APPLICATION**

#### **SOLE OWNERSHIP / PARTNERSHIP**

1. Copy of any of the following forms of Personal Identification
  - California Driver's License;
  - California Identification Number;
  - Federal Employee Identification Number (FEIN) if required for your business;
  - Copy of any State, Federal or County permit or certificate required for business;
  - Insurance Documents.

\*\* If a partnership, please provide a form of personal identification for each partner
2. Verification of Resale Permit. Address on the Resale Permit must match the location of the business
  - Resale Permit Information can be found at the following link:  
<http://www.cdfta.ca.gov/formspubs/pubs/pub107/>

#### **CORPORATION OF LLC (LIMITED LIABILITY COMPANY)**

1. Copy of any of the following forms of Personal Identification
  - California Driver's License;
  - California Identification Number;
  - Federal Employee Identification Number (FEIN) if required for your business;
  - Copy of any State, Federal or County permit or certificate required for business;
  - Insurance Documents.

\*\* If a partnership, please provide a form of personal identification for each partner
2. Approval letter from the IRS with Employer Identification Number (EIN)