



# City of Emeryville

INCORPORATED 1896

1333 Park Avenue. Emeryville, CA 94608-3517  
t (510) 596-4300 | f (510) 658-8095  
Finance@emeryville.org

## **ANNUAL BUSINESS LICENSE RENEWAL PACKET – COMMERCIAL LANDLORD**

November 22, 2021

Dear Business Owner/Operator:

Enclosed is your Annual Business License Tax package for 2022. Please update and complete the Business License Tax Return, Tenant Listing, and Services Provider survey for **each property owned in the City of Emeryville** and return them with the required payment of taxes due to:

**City of Emeryville Finance Department  
PO Box 674  
Rodeo, CA 94572**

Please make checks payable to the City of Emeryville.

### **Updating Information on Tax Return and New Business License Application**

It is important that you complete and/or make any corrections to the information preprinted on the Business License Tax Return provided in this package. Please "line out" incorrect information and print the correct information next to it. Businesses that have changed ownership must complete a new business application. A copy of the application is available on the City's website at: <http://www.emeryville.org> or may be requested by emailing [Finance@Emeryville.org](mailto:Finance@Emeryville.org) or calling 510-596-4325.

### **Business License Tax Rate & Calculation**

The Commercial Landlord business tax rate is 0.35% of annual gross receipts (GR x .0035), **with a minimum annual tax of \$25.00 and a 2022 maximum tax of \$397,656.68. There is also a \$10.00 renewal fee and a \$4.00 State Mandated Disability Access Fee for a total minimum payment of \$39.00.** Business License Taxes are calculated based on the prior calendar year's gross receipts. Therefore, the Business License issued for the year 2022 is based on 2021 gross receipts. ***The gross receipts from the sale of any Commercial Property within the City of Emeryville should also be included in the Total Gross Receipts.***

### **Due Date, Delinquency, Remittance Information**

**Business License Taxes are due January 1, 2022 and become delinquent after March 1, 2022.** Payments postmarked or received by the Finance Department after March 1, 2022 will be considered delinquent and subject to penalties and interest. The penalty rate is 5% per month with a maximum rate of 25% (5 months) of the tax amount. The interest on delinquent accounts is 1.5% per month on the total outstanding balance (tax + penalty) with no cap.

Please note we only accept checks for payment. Please submit the tax return and forms with your payment by post to the above address or in person at the City of Emeryville Finance Department counter located in the City of Emeryville Administration Building at 1333 Park Avenue, Emeryville, CA 94608.

### **Additional Information**

***All enclosed forms must be completed. Current licenses will be held until these forms are completed.***

Please note that the current Emeryville Municipal Code is available on the City's website at:

<http://www.emeryville.org>. If you have questions regarding the Municipal Code, the Business License renewal process or calculations of your Business License Tax due, please call the Business License Desk at (510) 596-4325 or email: [Finance@Emeryville.org](mailto:Finance@Emeryville.org).



# City of Emeryville

INCORPORATED 1896

1333 Park Avenue, Emeryville, CA 94608-3517

t (510) 596-4300 | f (510) 658-8095

Finance@emeryville.org

## 2022 COMMERCIAL LANDLORD BUSINESS LICENSE TAX RETURN

Returns are due January 1, 2022 and delinquent if received or postmarked after March 1, 2022

BUS ID#  
NAME:  
MAILING ADDRESS:

NUMBER OF LOCATIONS IN EMERYVILLE: \_\_\_\_\_  
NUMBER OF EMPLOYEES IN EMERYVILLE: \_\_\_\_\_  
BUSINESS PHONE NUMBER: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
NAICS CODE: \_\_\_\_\_

PROPERTY ADDRESS:

Line

A.) Gross Receipts:	\$ _____	Enter gross receipts from previous year
B.) Tax Rate:	x .0035	
C.) Tax Due: <b>Min. Tax Due is \$25</b>	\$ _____	Multiply line "A" by line "B" <b>If the return is postmarked after 03/01, Penalties are due.</b>
D.) Penalty (See Box 1 below):	\$ _____	
E.) Subtotal:	\$ _____	Sum of lines "C" and "D" <b>If the return is postmarked after 03/01, Interest is due.</b>
F.) Interest (See Box 2 below):	\$ _____	
G.) <b>Renewal Fee</b>	<b>\$10.00</b>	
H.) <b>State Mandated Disability Access &amp; Education Revolving Fund*</b>	<b>\$4.00</b>	
<b>Total Due:</b>	<b>\$ _____</b>	Sum of lines "E", "F", "G" & "H"

\*Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at <https://www.dgs.ca.gov/DSA>. The Department of Rehabilitation at <https://www.dor.ca.gov/>. The California Commission on Disability Access at <https://www.dgs.ca.gov/CCDA>.

Please make check payable to *City of Emeryville*  
Include the completed, signed tax return with your payment and remit to:  
City of Emeryville  
Finance Department  
P.O. Box 674  
Rodeo, CA 94572

Box 1- Penalty Calculation	Penalties are due if the return is post marked after March 1 <sup>st</sup> <b>Capped at 25% (EMC 3-1.116)</b>	
March 2 - March 31	5%	of Tax Due on line "C" above.
April 1 - April 30	10%	of Tax Due on line "C" above.
May 1 - May 31	15%	of Tax Due on line "C" above.
June 1 - June 30	20%	of Tax Due on line "C" above.
On or after July 1	25%	of Tax Due on line "C" above.

Box 2- Interest Calculation	Interest is due if the return is post marked after March 1 <sup>st</sup> <b>1.5% per month – no cap (EMC 3-1.119) *</b> <b>*Add 1.5% for each additional month</b>	
March 2 - March 31	1.50%	of Subtotal on line "E" above.
April 1 - April 30	3.00%	of Subtotal on line "E" above.
May 1 - May 31	4.50%	of Subtotal on line "E" above.
June 1 - June 30	6.00%	of Subtotal on line "E" above.
July 1 - July 31	7.50%	of Subtotal on line "E" above.

I declare, under penalty of perjury, that to my knowledge all information contained in this statement/tax return is true and correct.

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

Title: \_\_\_\_\_

Print name: \_\_\_\_\_

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

**Please complete the Closure of Business Affidavit on backside if your company is no longer doing business in Emeryville.**

## CLOSURE OF BUSINESS

If the business is closed, please complete this section and return this form to the City of Emeryville Administration Building at 1333 Park Avenue, Emeryville, CA 94608 so we can update our records.

**BUS ID #** \_\_\_\_\_ **BUS NAME:** \_\_\_\_\_

Date Business Closed \_\_\_\_\_ Reason for Closure \_\_\_\_\_

**If moved from Emeryville, why?** \_\_\_\_\_

I declare, under penalty of perjury, that to my knowledge all information contained in this statement is true and correct.

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

Title: \_\_\_\_\_

Print name: \_\_\_\_\_

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

**FOR OFFICE USE ONLY:**     Updated BL to "C" in Superior    Date Updated \_\_\_\_\_    Processed by \_\_\_\_\_



# City of Emeryville

INCORPORATED 1896

1333 Park Avenue, Emeryville, CA 94608-3517

t (510) 596-4300 | f (510) 658-8095

Finance@emeryville.org

## Tenant & Sublease Tenant Listing

BUS ID #: \_\_\_\_\_

NAME: \_\_\_\_\_

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

### TENANT LIST:

Name or Business Name	Suite	Phone #	Contact Person	Move In Date

(For additional space photocopy as needed)

This information is required (EMC section 3-1.128 (d))

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_



# City of Emeryville

INCORPORATED 1896

1333 Park Avenue, Emeryville, CA 94608-3517

t (510) 596-4300 | f (510) 658-8095

Finance@emeryville.org

## Service Provider Survey

Please fill out the names and addresses of the service providers that your business utilizes throughout the year.

**Property Manager:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Leasing Agent:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Security Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Alarm Company:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Vending/ATM Machines:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Parking Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Landscaping Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**HVAC Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Elevator Maint Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Window Cleaners:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Delivery Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Laundry/Linen Service :** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Janitorial Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Uniform Service:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_