



TOWN OF LOS GATOS

Community Development

(408) 354-6874 • FAX: (408) 354-7593

Planning@LosGatosCA.gov

110 E. Main Street
Los Gatos, CA 95030

SIC Code: _____

Business License Routing Form

Date: _____

Business License # _____

New Business

Business Name Change

Address Change

Ownership Change

Business Name: _____

Applicant's Name: _____

Business Address: _____ Suite # _____ ZIP Code _____

Phone Number: _____ Applicant's Email: _____

Previous Location of Business (address change only)

Business Floor: Basement First Floor Above First Floor

Business Floor Area: _____

Description of Business Activity

For Official Use Only

Planning Division (408) 354-6874

- Approved
- Pending
- Denied
- Not Applicable

Signature

Date

Use: Office Personal Service Zone: _____

Restaurant Retail _____

Medical Firearms Sales _____

Classes Sharing Space/Station Rental _____

Other: _____ Formula Retail _____

Previous Use of Building Space: _____

Planning Division Requirements:

- New Use and Occupancy Certificate _____
- Existing Use and Occupancy Certificate _____
- Conditional Use Permit _____
- Home Occupation Permit _____

Comments/Conditions: _____

Police Department (408) 354-5257

Police Department approval is required for all businesses involving massage therapy, vehicles for hire, fortune telling, solicitors, and peddlers.

- Approved
- Denied

Signature _____ Date _____