



CITY OF LAKEWOOD

BUSINESS LICENSE DEPARTMENT

(562) 866-9771 Extension 2622

CARNIVAL PROCEDURE

Date _____

Name _____

Address _____

City, State, Zip _____

Thank you for considering the City of Lakewood as a possible location for your upcoming carnival.

Following is a list of conditions and procedures required by the City of Lakewood to permit a carnival within the City. The City of Lakewood requires no less than 90 days written notice to process a request for a carnival, in accordance with the Lakewood municipal code.

- _____ Completed Carnival Application which includes event dates and anticipated attendance.
- _____ Completed business license application for carnival company (Rate = \$335.00 for the first day + \$85.00 each additional day)
- _____ Signed carnival agreement between Carnival Sponsor and Carnival Operator.
- _____ Written permission from all involved property owners if private property is to be used, involved in, or effected by the carnival.
- _____ Obtain all necessary permits and approvals, including electrical, ride inspection, Bingo permits, ABC and County Health Department.
- _____ Contact L.A. County Sheriff's department to determine whether additional law enforcement is required.
- _____ Certificate of insurance naming the City of Lakewood as additional insured.
(\$1,000,000.00 minimum)
- _____ Provide the number and description of the rides, game booths, food booths, beer garden and other carnival features.
- _____ Provide the City of Lakewood a site plan of the location where the carnival will take place, including location of all equipment and vehicles involved.
- _____ Provide the City of Lakewood with a Hold Harmless Agreement and a Carnival Acknowledgement Form.



City of Lakewood 5050 Clark Avenue Lakewood, CA 90712

PERMIT APPLICATION
CARNIVAL OR AMUSEMENT RIDES

Please Print

CARNIVAL INFORMATION

Date(s) Hours of Operation Anticipated Attendance

Number and Description of Events (Rides, Game Booths, Food Booths, Beer Garden, etc.)

APPLICANT (Church, School)

Name

Address City State Zip

Phone Number

EVENT COORDINATOR

Name

Address City State Zip

Phone Number Signature

CARNIVAL COMPANY

Name

Address City State Zip

Phone Number

Contact Person (Name)

Address City State Zip

Phone Number Signature

A SITE PLAN FOR THE CARNIVAL INCLUDING LOCATION OF RIDES, FOOD BOOTHS, GAME BOOTHS, BEER GARDEN, ETC. SHOULD ACCOMPANY THIS APPLICATION

OTHER PERMITS (ELECTRICAL, RIDE INSPECTION, ABC, BINGO, ETC.) IN RELATION TO THIS CARNIVAL MUST BE OBTAINED BEFORE THE CARNIVAL CAN COMMENCE

Your signature above certifies that you have received, read and understand Ordinance No. 2005-05 attached hereto and will abide by the requirements of the Ordinance under penalty of misdemeanor charges.

CITY OF LAKEWOOD BUSINESS LICENSE

Business License Division, P.O. Box 220, Lakewood, CA 90714
 Tel: 562-866-9771 x 2622, E-mail: BusLic@Lakewoodcity.org



ANNUAL BUSINESS LICENSE APPLICATION (JULY 01- JUN 30)

****APPLICANT MAY SUBMIT NEW BUSINESS LICENSE APPLICATION IN PERSON OR BY MAIL. ADDITIONAL DEPARTMENT APPROVAL MAY BE REQUIRED****

PLEASE FILL ALL APPLICABLE ITEMS. FIELDS WITH AN ASTERISK (*) ARE REQUIRED. PLEASE PRINT CLEARLY:

| | | | | |
|--|-----------|-------------------|-------------------------|-----|
| Business Name/ DBA*: | | Business Phone *: | Business Email Address: | |
| Name of Owner*: | | Phone: | Email Address: | |
| Business Address*: | Ste./Apt. | City | State | Zip |
| Mailing Address (if different from above): | Ste./Apt. | City | State | Zip |

Describe your Business Operations*:

| | | | | |
|---|---|-----------------|------------------------------|------------|
| Federal I.D./Last 4-digit of Social Security#*: | State Contractor No.(contractors only): | ABC License No: | Industrial Waste Permit No.: | Resale No. |
|---|---|-----------------|------------------------------|------------|

Ownership: Corporation Partnership Sole Proprietor

Type of Business*: Retail Wholesale Manufacturing Home Occupation Other: _____

| | | | |
|------------------------------------|--|------------------------------------|---------------------|
| No. of Employees (including self)* | Annual Gross Receipts (estimate) \$ | Unit Count (Vending Machines, etc) | Other Taxable Units |
|------------------------------------|--|------------------------------------|---------------------|

Pro-rated Fee Schedule:
 07/01-9/30 payment 100% 10/1 - 12/31 pro-rate 90% 0 1/01-03/31 pro-rate 60% 04/01-06/30 pro-rate 30%

NAMES OF OWNERS, PARTNERS, OR CORPORATE OFFICERS:

| | | | |
|---|--------|----------------|--------|
| Name of Second Business Owner/Officer : | Title: | Email Address: | Phone: |
|---|--------|----------------|--------|

ADDITIONAL INFORMATION:

Name of Business Property Owner/Landlord (If Leased):

| | |
|----------|---------------|
| Address: | Telephone No. |
|----------|---------------|

I DECLARE, UNDER PENALTY OF PERJURY, THE ABOVE STATEMENTS TO BE TRUE AND CORRECT.

| | |
|---------------------------------|--------|
| APPLICANT NAME (Please Print)*: | TITLE: |
| APPLICANT SIGNATURE*: | DATE: |

OFFICE USE ONLY

| | | | |
|--|---------------------------------------|----------------------------------|----|
| Business License No: | Base Rate: | \$ | |
| Zoning: | Employee Calculations: _____ x \$5.00 | \$ | |
| CUP No. | DRB No.: | Gross Receipt Calculations: | \$ |
| Industrial Waste Permit #: | Unit Calculations: | \$ | |
| Department Approval: _____ Date: _____ | State Mandated Fee*: | \$4.00 | |
| | Penalties:\$ | Prorate Discount (_____ .000%): | |

| | |
|--------|----------------------------|
| Notes: | TOTAL TAXES DUE: \$ |
| | |

CITY OF LAKEWOOD BUSINESS LICENSE INSTRUCTIONS/ FEE SCHEDULE

NEW BUSINESSES: Each person subject to a license tax shall apply for a license prior to beginning business.

The City of Lakewood's business license calendar year begins July 1, and ends on June 30. All Applications for a City License must be renewed **by June 30** of the current license year.

Automotive dealers, grocers, and gasoline service stations are \$85.00 annually plus \$0.07 per \$1,000 in gross receipts over \$500,000.

Retail services and wholesale sales (i.e. restaurants with no alcoholic beverages, restaurants with beer and wine, restaurants with liquor) are \$85.00 annually plus \$0.15 per \$1,000 in gross receipts over \$100,000.

General Services (i.e. beauty salons, nail salons, janitorial services, filming, and real estate offices) are \$85.00 annually plus \$5.00 per employee in excess of one.

Professional Services (i.e. doctor, dentist, chiropractor, massage therapist) are \$120.00 annually per professional and \$5.00 per non-professional.

Home occupation businesses are \$50.00 annually.

General Contractors are \$120.00 annually and \$5.00 per employee in excess of one.

Plumbing, heating, air conditioning, electrical, refrigeration, framing, and swimming pool contractors are \$100.00 annually plus \$5.00 per employee in excess of one.

All other contractors are \$85.00 annually plus \$5.00 per employee in excess of one.

Delivery Services are \$85.00 annually.

Multiple dwellings are \$33.00 per first four units and \$3.50 per additional unit annually.

Christmas tree and pumpkin lots are \$250.00 per season per location.

If your business does not fall into one of the above listed categories, please contact the Business License office at (562) 866-9771 extension 2622 for clarification and rates.

Business licenses are not transferable.

A fee of \$8.00, payable to the City of Lakewood, shall be charged to make changes to the license.

Effective January 1, 2018, a state mandated fee of \$4.00 shall be charged to all business license applications and renewals per Assembly Bill 1379. Please add the \$4.00 mandated fee to your base rate.

"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 www.dgs.ca.gov/dsa/Home.aspx, The Department of Rehabilitation at www.rehab.cahwnet.go, or The California Commission on Disability Access at www.cdda.ca.gov."

Late Filing Penalty (for renewals):

10% penalty will be applied on August 1st
15% penalty will be applied on September 1st
25% penalty will be applied on October 1st
50% penalty will be applied on November 1st

For questions and inquiries, please contact:

City of Lakewood- Business License Office
P.O. Box 220,
Lakewood, CA 90714
Phone: (562) 866-9771 ext. 2622
Fax: (562) 866-0505
Email: Buslic@lakewoodcity.org

*Please Note: New Lakewood business applications and applications requiring City permits will require an original signature.



Carnival Company Acknowledgement Form

Lakewood Municipal Code Section 6404.H

Section 6404.H of the Lakewood Municipal Code states:

It shall be unlawful for any person or organization conducting a carnival to employ any person to work at such carnival who has been convicted of any felony, or any misdemeanor which constitutes a violent crime, or who is required to register as a sex offender pursuant to Section 290 of the California Penal Code. Persons working at a carnival shall be subject to spot checks by law enforcement personnel, and shall produce identification promptly when asked to do so by law enforcement personnel.

I hereby acknowledge the above condition as a requirement to operate in the City of Lakewood.

Company Name

Print Name

Signature

Date



CITY OF LAKEWOOD

HOLD HARMLESS AGREEMENT

_____, hereby release, discharge and agree not to sue the City
(Company/Individual name)

of Lakewood, it's officers, elected officials, employees, and agents, to the extent permitted by law, the CITY, its elected officials, officers, agents, and employees should be fully protected from any loss, injury, damage, claim, lawsuit, cost, expense, attorneys fees, litigation costs, defense costs, court costs or any other cost arising from or in any way related to the performance of this event permit.

In consideration for being permitted to the above event/work, I hereby agree for myself, administrators officers and assigns, that I shall indemnify and hold harmless the City of Lakewood, it's officers, employees and agents from any and all losses, liabilities, damages, cost and expenses, including reasonable attorney's fees, expert witness fees, and cost to the extent that are caused by negligence of Permittee, or any of the Permittee's officers, agents, employees or contractors, caused by, arising out of or in any way connected with exercise by permittee.

Permittee will not discriminate against any employee or applicant for employment because of race, color, religion, ancestry, sex, age, national origin or physical handicap.

The parties to this agreement understand that this document is not intended to release any party from any act or omission of "gross negligence" as the term is used in applicable case law and/or statutory provision.

The parties hereto agree that the permittee, its officers, agents and employees, in the performance of this permit shall act in an independent capacity and not as officers, agents, or employees of the City of Lakewood.

The City of Lakewood shall have the privilege of inspecting the premises covered by this permit at any or all times.

Permittee hereby agrees to comply with all the rules and regulations of the facility or institution subject to this permit.

The City of Lakewood may terminate this permit at any time if permittee fails to perform any covenant herein contained at the time and in the manner herein provided. The City of Lakewood agrees it will not unreasonably exercise this right of termination.

By: _____

Title: _____

Date: _____