



CITY OF HAWTHORNE
4455 W. 126th Street • Hawthorne, CA 90250-4482

COMMERCIAL/INDUSTRIAL USE QUESTIONNAIRE

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

PROPERTY OWNER NAME: _____ **CONTACT PHONE#:** _____

PROPERTY OWNER ADDRESS: _____

PLEASE ANSWER THE FOLLOWING (any questions left blank will automatically results in denial of your application):

1. What is the name of the proposed business? _____

2. Describe the proposed business. **(Be specific)** _____

3. Are you conducting more than one type of business with or without a separate DBA at this location? Yes___ No___ If so, please list _____
4. What are the average number of employees? W2 _____ 1099 _____
5. Are there any vending machines, kiosks, amusement devices, ATM machines located in this facility? Yes _____ No _____ if yes, How many of each?

Amusement Devices _____ Kiosks _____ ATM _____ Vending Machines _____
6. Is there a property manager or property owner on site? Yes _____ No _____
7. Specify the square of each area being occupied and it's true use: Total Sq Ft _____
Commercial use: Office area _____ Storage area _____ Retail area _____
Industrial Use: Office area _____ Storage area _____ Retail area _____
Please list any other are, not mentioned above, it's proposed use and Sq footage:

8. Will you have an alarm system? _____
9. Are you selling Tobacco? YES _____ NO _____
10. Are you selling Alcohol? YES _____ NO _____
11. What are the approximate hours of operation? Mon. - Fri. _____ Sat. / Sun. _____
12. Are there any other businesses at this location? If yes,
List all additional tenants _____

Licensing & Cashiering
4455 West 126TH Street
Hawthorne, CA 90250
(310) 349-2935 (office)

Account No. _____
(Office use only)



CITY OF HAWTHORNE BUSINESS LICENSE REGULATION CONSENT FORM

Please be advised that an on-site inspection by both the Department of Building & Safety and the Fire Department will be conducted to determine conformance with all Building and Fire Code Requirements. Any violation identified of any State, County or City Code, (including, but not limited to, Building, Electrical, Mechanical, and Plumbing codes; Los Angeles County Fire Codes, and Hawthorne Municipal Codes) shall immediately be corrected and approved by the City Inspector.

The "Office of Chief of Police Services" will also conduct a review of each proposed business entity and corresponding business proprietor (s) within the Licensing process. The review focus will ensure that federal, state, and local laws and ordinances are not inherently violated pursuant to said business conduct. This review process will also validate the legitimacy of any provided personal and business information provided to the City.

Failure to comply with all regulations could result in immediate closure of the business until such time that necessary corrections are made and approved by the appropriate Department.

I, _____, am the _____, of the following business.
(Name of Business representative) (Title of representative)

Business Name (DBA): _____

Business Address: _____
(Address, City, State, & Zip Code)

I hereby certify, under penalty, that I have read and understand the Business License / Tax Certificate application and inspection process. Furthermore, I agree to comply with all state and Local Regulations and to correct any potential violation identified by the City Representatives. I understand that failure to do so could result in immediate closure of the above business until such time that necessary corrections are made and approved.

Signature _____

Date _____



Business Name

Business Address

Account Number

CITY OF HAWTHORNE - FOR DEPARTMENTAL USE ONLY

Pursuant to H.M.C. Section 5.02.010, the attached application(s) has been reviewed by the Planning Department, Building Department and the Fire Department:

CITY MANAGER

DATE

CITY ATTORNEY

DATE

CHIEF OF POLICE

DATE

CODE COMPLIANCE INSPECTION REVIEW/APPROVAL FORM

Planning Department

Land Use Zone:

Use:

Remarks _____

Approved Denied Inspector:

Date:

Building & Safety Department

Occupancy Group:

Use:

Construction Type:

Remarks: _____

Approved Denied Inspector:

Date:

Fire Department

Occupancy Group:

Use:

Building Sprinklered: Yes / No

Construction Type:

Fire Permits Required: Yes / No

Remarks _____

Inspector:

Date:

Approved Denied