



City of Burbank  
 Community Development Department – Building Division  
 150 North Third Street / 818-238-5280 / www.burbankca.gov

Mail and Make Checks Payable to:  
 City of Burbank  
 Building Division  
 P.O. Box 6459  
 Burbank, CA 91510-6459

**BUSINESS APPLICATION**

**PLEASE PRINT ALL INFORMATION**

Date of Application:		
Type of Permit: <input type="checkbox"/> Entertainment <input checked="" type="checkbox"/> Itinerant Merchant <input type="checkbox"/> Daily Food Peddler		
Name of Event:		
Address of Event:		
Date/s of Event:		
Business Name: (for Daily Food Peddler use Individual's Name)		
For Daily Food Peddler – Food Items to be Sold:		
Mailing Address:		
Corporate Name:		
Business Phone: ( )	Business FAX: ( )	
Email Address:	Web Address:	
Contact Person Name:	Contact Person Phone: ( )	
Contact Person Email Address:		
Type of Ownership: <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Ownership <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____		
Social Security or Federal ID Number:		
Owners, Partners or Corporate Officers (attach additional sheets if needed)		
Name:	Title:	
Home Address:		
Phone: ( )	Driver License No.:	Email:
Name:	Title:	
Home Address:		
Phone: ( )	Driver License No.:	Email:

I hereby certify that the information furnished in this application and the attached materials are true and correct to the best of my knowledge and belief. I understand that I may be required to submit additional information related to the proposed business before a decision can be made. I understand that this application is not proof of final approval of a license, permit, or tax certificate. This is only an application.

Applicant's Printed Name \_\_\_\_\_ Title \_\_\_\_\_  
 Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_