



City of Fort Bragg

416 N Franklin Street
Fort Bragg, CA 95437
Phone: (707) 961-2823
Fax: (707) 961-2802

Meeting Agenda Special Meetings

Thursday, November 10, 2022

11:00 AM

Via Video Conference

Visit Fort Bragg

MEETING CALLED TO ORDER

ROLL CALL

PLEASE TAKE NOTICE

Due to state and county health orders and to minimize the spread of COVID-19, Committee Members and staff will be participating in this meeting via video conference. The Governor's executive Orders N-25-20, N-29-20, and N-15-21 suspend certain requirements of the Brown Act and allow the meeting to be held virtually.

The meeting will be live-streamed on the City's website at <https://city.fortbragg.com/> and on Channel 3. Public Comment regarding matters on the agenda may be made by joining the Zoom video conference and using the Raise Hand feature when the Chair calls for public comment. Any written public comments received after agenda publication will be forwarded to the Committee Members as soon as possible after receipt and will be available for inspection at City Hall, 416 N. Franklin Street, Fort Bragg, California, during normal business hours. All comments will become a permanent part of the agenda packet on the day after the meeting or as soon thereafter as possible, except those written comments that are in an unrecognized file type or too large to be uploaded to the City's agenda software application. Public comments may be submitted to Administrative Assistant, Diana Sanchez at dsanchez@fortbragg.com.

ZOOM WEBINAR INVITATION

You are invited to a Zoom webinar.

When: Nov 10, 2022 11:00 AM Pacific Time (US and Canada)

Topic: Visit Fort Bragg Committee

Please click the link below to join the webinar:

<https://us06web.zoom.us/j/83455176686>

*Or Telephone: US: +1 669 444 9171 or +1 719 359 4580 (*6 mute/unmute, *9 raise hand)*

Webinar ID: 834 5517 6686

TO SPEAK DURING PUBLIC COMMENT PORTIONS OF THE AGENDA VIA ZOOM, PLEASE JOIN THE MEETING AND USE THE RAISE HAND FEATURE WHEN THE CHAIR OR ACTING CHAIR CALLS FOR PUBLIC COMMENT ON THE ITEM YOU WISH TO ADDRESS.

1. APPROVAL OF MINUTES

1A. [22-567](#) Approve Minutes of October 13, 2022

Attachments: [VFBM 10132022](#)

2. PUBLIC COMMENTS ON NON-AGENDA ITEMS

3. CONDUCT OF BUSINESS

- 3A. [22-573](#) Receive Update from Idea Cooperative
- 3B. [22-571](#) Receive Oral Update from VFB Special Events Subcommittee
- 3C. [22-572](#) Receive Oral Update from Arts and Culture Subcommittee
- 3D. [22-574](#) Receive Report on Busking for First Fridays

Attachments: [Busking Staff Report](#)
[Att 1. Busking Application](#)
[Att 2. New Vendor Form and Business License Application](#)
[Att 3. Draft First Friday LTP](#)

- 3E. [22-575](#) Review Visit Fort Bragg Membership Status Application and Direct Staff to Publicize the Open Seats and Application Materials to Appoint New (or Returning) Members in December 2022

Attachments: [11102022 Membership Report](#)
[Att 1. VFB Protocols](#)
[Att 2. VFB Committee Application](#)

4. MATTERS FROM COMMITTEE / STAFF

ADJOURNMENT

STATE OF CALIFORNIA)
)ss.
 COUNTY OF MENDOCINO)

I declare, under penalty of perjury, that I am employed by the City of Fort Bragg and that I caused this agenda to be posted in the City Hall notice case on November 7, 2022.

Diana Sanchez, Administrative Assistant

NOTICE TO THE PUBLIC

DISTRIBUTION OF ADDITIONAL INFORMATION FOLLOWING AGENDA PACKET DISTRIBUTION:

- *Materials related to an item on this Agenda submitted to the Council/District/Agency after distribution of the agenda packet are available for public inspection in the lobby of City Hall at 416 N. Franklin Street during normal business hours.*
- *Such documents are also available on the City of Fort Bragg’s website at <http://city.fortbragg.com> subject to staff’s ability to post the documents before the meeting*

ADA NOTICE AND HEARING IMPAIRED PROVISIONS:

It is the policy of the City of Fort Bragg to offer its public programs, services and meetings in a manner that is readily accessible to everyone, including those with disabilities. Upon request, this agenda will be made available in appropriate alternative formats to persons with disabilities.

If you need assistance to ensure your full participation, please contact the City Clerk at (707) 961-2823. Notification 48 hours in advance of any need for assistance will enable the City to make reasonable arrangements to ensure accessibility.

This notice is in compliance with the Americans with Disabilities Act (28 CFR, 35.102-35.104 ADA Title II).



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Text File

File Number: 22-567

Agenda Date: 11/10/2022

Version: 1

Status: Business

In Control: Special Meetings

File Type: Staff Report

Agenda Number: 1A.

Approve Minutes of October 13, 2022



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Meeting Minutes Special Meetings

Thursday, October 13, 2022

11:00 AM

Via Video Conference

Visit Fort Bragg

MEETING CALLED TO ORDER

Co-Chair Morsell-Haye called the meeting to order at 11:09 AM.

ROLL CALL

Present: 5 - Tess Albin-Smith, Jessica Morsell-Haye, Alison DeGrassi, Debra DeGraw and Tonda Fochs

Absent: 4 - Nancy Bennett, Barbara Bruce, Megan Caron and Jason Hurst

1. APPROVAL OF MINUTES

1A. [22-530](#) Approve Minutes of September 8, 2022

The minutes were approved by the Committee as presented.

2. PUBLIC COMMENTS ON NON-AGENDA ITEMS

Cornelia Reynolds.

3. CONDUCT OF BUSINESS

3A. [22-525](#) Receive Update from Idea Cooperative

Tom Kavanaugh of The Idea Cooperative gave a monthly update on the promotion calendar for the Visit Fort Bragg website. The shoulder reach campaign is something they will be working on in the following weeks, this will consist of targeted TV Ads and Online Pre-Roll. It should be ready after the Holidays. Tom also gave a brief presentation of the new Art & Culture Page.

Public Comment: None.

Discussion: The Committee is very pleased with the work that The Idea Cooperative is doing. Tom also reminded any businesses that are on the Visit Fort Bragg website to keep an eye on the information and/or page in regards to their business and reach out to them so that they can keep all information up to date.

3B. [22-526](#) Receive Oral Update from VFB Special Events Subcommittee

Administrative Analyst, Cristal Munoz gave an update on The Magic Market. It will be held October 29, 2022 from 11 AM to 4 PM. There are 44 vendors signed up. There will be food, musicians, and free kids activities.

Public Comment: None.

Discussion: There was some discussion about needing volunteers for the judging of the different contests including the Costume Contest and the Pumpkin Decorating/Carving Contest.

3C. [22-531](#) Receive Oral Report and Provide Direction Regarding Downtown Busking

Administrative Analyst, Cristal Munoz presented on the possibility of getting a Limited Term Permit (LTP) for busking in the downtown area as the Community Development Committee has recommended that the Visit Fort Bragg Committee initiate this LTP on a seasonal basis.

Public Comment: None.

Discussion: It was agreed that the Limited Term Permit for busking matter would be continued and put on the agenda for the next scheduled Visit Fort Bragg Meeting.

4. MATTERS FROM COMMITTEE / STAFF

None.

ADJOURNMENT

Co Chair Morsell-Haye adjourned the meeting at 11:44 AM.



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Text File

File Number: 22-573

Agenda Date: 11/10/2022

Version: 1

Status: Business

In Control: Special Meetings

File Type: Staff Report

Agenda Number: 3A.

Receive Update from Idea Cooperative



City of Fort Bragg

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Fort Bragg, CA 95437
Phone: (707) 961-2823
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Text File

File Number: 22-571

Agenda Date: 11/10/2022

Version: 1

Status: Business

In Control: Special Meetings

File Type: Staff Report

Agenda Number: 3B.

Receive Oral Update from VFB Special Events Subcommittee



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Text File

File Number: 22-572

Agenda Date: 11/10/2022

Version: 1

Status: Business

In Control: Special Meetings

File Type: Staff Report

Agenda Number: 3C.

Receive Oral Update from Arts and Culture Subcommittee



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Text File

File Number: 22-574

Agenda Date: 11/10/2022

Version: 1

Status: Business

In Control: Special Meetings

File Type: Staff Report

Agenda Number: 3D.

Receive Report on Busking for First Fridays



CITY OF FORT BRAGG

416 N. FRANKLIN, FORT BRAGG, CA 95437
PHONE 707/961-2823 FAX 707/961-2802

COUNCIL COMMITTEE ITEM SUMMARY REPORT

MEETING DATE: NOVEMBER 10, 2022
TO: VISIT FORT BRAGG COMMITTEE
FROM: CRISTAL MUNOZ, ADMINISTRATIVE ANALYST
AGENDA ITEM TITLE: RECEIVE REPORT AND PROVIDE DIRECTION REGARDING DOWNTOWN BUSKING

BACKGROUND AND OVERVIEW:

The Visit Fort Bragg Committee has expressed interest in having buskers in the Central Business District. Busking is an activity of playing music or performing in the street or another public place for voluntary donations. The Fort Bragg Municipal Code Section 9.44.070 Hawkers and Peddlers (Ord. 413, § 5) states that “it is unlawful for any person within the City to sell, advertise, or invite patronage for anything by public outcry or by use of any type of noise-making or sound amplification device”.

The Community Development Committee recommended allowing busking in the Central Business District with a Limited Term Permit. A Limited Term Permit will allow short-term activities that might not meet the normal development or use standard, but may otherwise be acceptable because of their temporary nature.

RECOMMENDATION:

The Visit Fort Bragg Committee can apply for the Limited Term Permit on an annual basis to allow busking on First Fridays. We would then require the buskers to apply for a First Friday Busking application. This permit will have special conditions to ensure public welfare and safety, such as:

- Buskers shall only be allowed where there is adequate room to accommodate normal pedestrians and handicapped access. In all cases, doorways must not be impeded and a minimum width of 4 feet clearance must be maintained.
- This permit may be suspended at any time to avoid conflicts with activities in the public right-of-way, such as construction, parades, or emergencies.
- Busking shall not negatively impact health, safety, or public welfare – no use of vulgarity, profane language, aggressive quips, etc.

The Visit Fort Bragg Committee has allocated \$800 for musicians. Buskers will be funded on a first come, first served basis. Buskers shall secure a business license if receiving

payment from VFB Committee. Should a performer not wish to obtain a business license or if the allocated funded has been expended, tip jars are encouraged.

ALTERNATIVES:

Visit Fort Bragg Committee does not pursue busking on First Fridays.

ATTACHMENTS:

VFB First Friday Busking Application

New Vendor Forms and Business License Application

Draft VFB First Friday Limited Term Permit



City of Fort Bragg
Visit Fort Bragg Committee
First Friday Busking Application

Permission is requested to entertain (play music, dance, sing) on the City of Fort Bragg right of way on the First Friday of the month between the hours of 4:00 PM and 9:00 PM as follows:

Name:

Address:

Description of performance (see policy on reverse):

The undersigned agrees that busking will occur in accordance with the standards and special conditions of the Visit Fort Bragg Committee's Limited Term Permit to allow busking as part of the First Friday festivities.

Authorized Signature:

Date:

City Use:

INSPECTED AND APPROVED BY THE COMMUNITY DEVELOPMENT DEPARTMENT.
A FULLY EXECUTED COPY OF THIS APPLICATION SHALL CONSTITUTE APPROVAL.

Signature:

Date:

**Visit Fort Bragg Committee Limited Term Permit
Allowing Busking on First Fridays between the hours of 4:00 PM and 9:00 PM,
Subject to the Following Special Conditions:**

SPECIAL CONDITIONS

1. This permit is granted for a limited term and is valid the first Friday of every month beginning December 2, 2022, through December 1, 2023, between the hours of 4:00 PM to 9:00 PM.
2. Interested performers shall complete and submit a VFB First Friday Busking Application. Please contact Cristal Munoz at cmunoz@fortbragg.com or 707-961-2823 x103.
3. Buskers shall secure a business license if receiving payment from VFB Committee (otherwise, tip jars are allowed).
4. No electrical connections to structures shall be allowed.
5. Buskers shall only be allowed where there is adequate room to accommodate normal pedestrian and handicapped access. In all cases, doorways must not be impeded and a minimum width of 4 feet clearance must be maintained.
6. This permit may be suspended at any time to avoid conflicts with activities in the public right-of-way, such as construction, parades, or emergencies.
7. Busking shall not negatively impact health, safety, or public welfare – no use of vulgarity, profane language, aggressive quips, etc.
8. During the event, an approved VFB First Friday Busking Application shall be available upon request.
9. The City of Fort Bragg, its employees, officers, and volunteers are not responsible for and shall be held harmless and fully indemnified by the user for any claims arising out of accidents, personal injury, damage to or loss of personal property, or wrongful death that occur during or result partially or entirely from use of City facilities.
10. The indemnification provided by this paragraph shall cover all acts whether negligent, grossly negligent or intentional. The City shall be allowed to select legal counsel and be reimbursed for legal costs for any matter covered by this paragraph.

STANDARD CONDITIONS

1. This action shall become final on the 11th working day following the decision unless an appeal to the City Council is filed pursuant to Chapter 18.92.030;
2. The application, along with supplemental exhibits and related material, shall be considered elements of this permit, and compliance therewith is mandatory, unless an amendment has been approved by the City;
3. This permit shall be subject to the securing of all necessary permits for the proposed development from City, County, State and Federal agencies having jurisdiction. All plans submitted with required permit applications shall be consistent with this approval;
4. This permit shall be subject to revocation or modification upon a finding of any one or more of the following:
 - A. That such permit was obtained or extended by fraud.
 - B. That one or more of the conditions upon which such permit was granted have been violated.
 - C. That the use for which the permit was granted is so conducted as to be detrimental to the public health, welfare or safety or as to be a nuisance.
 - D. A final judgment of a court of competent jurisdiction has declared one or more conditions to be void or ineffective, or has enjoined or otherwise prohibited the enforcement or operation of one or more conditions; and
5. The site occupied by the short-term activity shall be cleaned of debris, litter, or other evidence of the temporary activity on completion or removal of the activity, and shall thereafter be used in compliance with this Development Code.

NEW VENDOR APPROVAL AND SET UP

TO BE COMPLETED BY CITY EMPLOYEE

This form is required to establish a relationship with any new vendor. Payments will not be processed unless this form and all required documentation is submitted and approved.

Steps to be completed by CITY EMPLOYEE BEFORE a New Vendor is established.

- * Determine if the Vendor is NEW. Check with someone in Finance if you are unsure.
- * Determine if a Business License is required. The Fort Bragg municipal code requires a Business License when:
Work is being performed within the City limits, or
A service is being provided within the City limits.
If you are unsure check with someone in Finance.
You should also check with the City Clerk to determine if insurance is required.
- * If a business license is required communicate that requirement to the Vendor during the pricing stage so they know what is required of them.
- * Provide a Form W-9 to the Vendor

Steps to Establish a New Vendor Relationship:

NAME OF NEW VENDOR: _____

- * Complete this form and attach the following:

Completed Business License Application, with appropriate payment

OR:

Name of **CITY EMPLOYEE** Responsible for Establishing New Vendor

Form W-9 attached.

Business License Required; **OR**

Business License NOT Required

Exception: _____

Vendor Information Form Completed

NEW VENDOR INFORMATION FORM

TO BE COMPLETED BY VENDOR OR DESIGNEE

This form is required to establish a relationship with any new vendor. Payments will not be processed unless this form and all required documentation is submitted and approved.

NAME OF VENDOR _____

REMIT ADDRESS _____

CONTACT NAME _____

PHONE NUMBER _____ **EMAIL** _____

By signing below Vendor acknowledges that no payment was made to the City, City official, officer, or employee of the City in exchange of a sales or other type of business arrangement.

Vendor may not employ any City official, officer or employee in the performance of the Services or manufacture of products, nor may any official, officer or employee of City have a financial interest in this Vendor that would violate California Government Code §1090 et seq. Vendor and its employees hereby warrants that it is not now, nor has it been in the previous twelve (12) months, an employee, agent, appointee, or official of City. If Vendor was an employee, agent, appointee, or official of City in the previous twelve months, Vendor warrants that it did not participate in any manner in the forming of this Agreement.

AUTHORIZED SIGNATURE OF VENDOR:

DATE: _____

Finance Department Approval: _____
Date _____ Vendor # _____

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p>		
	<p>2 Business name/disregarded entity name, if different from above</p>		
	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>	
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p>	Requester's name and address (optional)	
	<p>6 City, state, and ZIP code</p>		
	<p>7 List account number(s) here (optional)</p>		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-							
or											
Employer identification number											

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or “doing business as” (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity’s name as shown on the entity’s tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a “disregarded entity.” See Regulations section 301.7701-2(c)(2)(iii). Enter the owner’s name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner’s name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on line 2, “Business name/disregarded entity name.” If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys’ fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.

You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.

You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions.

You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



Finance Department
 416 N Franklin St
 Fort Bragg, CA 95437
 (707) 961-2825

TWO SIDED DOCUMENT
 Please complete both sides of this application.

APPLICATION FOR BUSINESS LICENSE

(Please Print All Information Clearly. We accept Cash/Check only for taxes & Fees)

Start Date _____

BUSINESS LOCATION

Business Name: _____

Business Location _____ Check One: upstairs _____ downstairs _____

City _____ **St** _____ **Zip** _____

Business to be conducted from: Home _____ Garage/Shop/Accessory Structure _____ Commercial Structure _____

Previous Use At this Address: _____

Tools, chemicals, and/or equipment to be used in Business: _____

BUSINESS CONTACT

Business Mailing Address: _____

City _____ **St** _____ **Zip** _____

Business Phone: _____ Email: _____

OWNER INFORMATION (Please list all owners / members / corporate officers / board members)

*If more than four individuals, please attach a separate sheet of paper.

1) Owner Name: _____ ID #: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Phone No: _____ Date of Birth: _____

2) Owner Name: _____ ID #: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Phone No: _____ Date of Birth: _____

3) Owner Name: _____ ID #: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Phone No: _____ Date of Birth: _____

4) Owner Name: _____ ID #: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Phone No: _____ Date of Birth: _____

City Use Only

Customer No. _____

License No. _____

Business Type _____

Business License Fee _____

Tax \$ _____

Fee \$ _____

State \$ **\$4.00**

Total: \$ _____

(cash or check only)

(CONTINUED ON PAGE TWO)

BUSINESS INFORMATION

1. Is this a: (circle one) 1)New Business 2)Owner Change 3)Name Change 4)New Location 5)Renewal

2. Type: 1) Retail 2)Wholesale 3) Service 4) Professional Service 5) Contractor 6) Manufacturer 7) Other _____

2A. Merchandise Sold: _____ and/or Services Rendered: _____

3. Legal Status: Sole Proprietor / Partnership / Corporation / Association / Non-Profit Corporation

3A. Partnership/Corporation/LLC # (if applicable): _____

(list board members on page one under Business Owner Information)

4. Tax ID number (FEIN or Social Security No.):

5. Does your business have employees? 1) Yes 2) No 3) Not currently, but plan to hire.

5A. If you answered 1 or 3, please provide your State Employer Identification No (SEIN)

SEIN: _____ (For more information, see instruction page)

6. Does your business sell tangible products? 1) Yes 2) No

6A. If yes, please provide your CA Retail Sales Tax Number. (also called BEAN or "Resale Number")

Retail Sales Tax Number: _____ (For more information, see instruction page)

Required: (The State of California requires many businesses and professions to have a license issued by the Department of Consumer Affairs. For a listing of required businesses & professions please visit the Dept. of Consumer Affairs online at "http://www.dca.ca.gov")

7. CA State License Number: _____

OR: State Contractor Number: _____

OR: I certify that I am exempt from State Licensing Requirements _____ Initial _____

8. Does your business sell food or food products? 1) Yes 2) No

8A. If yes, please provide health permit no.: _____ AND attach copy of health permit.

9. Does you business manufacture and/or sell alcohol? 1) Yes 2) No 3) License Pending

9A. If yes, provide license # _____ AND attach copy of license.

I hereby certify under penalty of perjury that the foregoing statements contained in this application are true and correct to the best of my knowledge and belief and that the business identified in this application will be conducted in accordance with the provisions of zoning and sign ordinances contained in the Fort Bragg Municiple Code.

Signed and Dated _____ Signature _____ Date _____

CERTIFICATION OF STATE & FEDERAL STORMWATER CONTROL REQUIREMENTS

Businesses located inside the City Limits must complete

1. Primary Standard Industry Code (SIC) # _____

Must provide 4-digit SIC. See: https://www.naics.com/code-search/

2. Check and complete all that apply:

[] This business is subject to the California Industrial General Permit; we have obtained coverage for our operations and continually implement the requirements of this permit coverage. (Complete A & B below)

A. Primary Business Activity _____

B. Industrial General Permit Waste Discharge Identification (WDID) # _____

[] This business is NOT subject to the California Industrial General Permit.

[] I need more information to determine whether this business is subject to the California Industrial General Permit.

I certify that our facility prevents potential pollutants from being discharged from our business location.

Signed and Dated _____ Signature _____ Date _____

List Board Attached YES / NO

Check all needed: FEIN _____ SEIN _____ BEAN _____

FD # _____

ABC# _____

SIC# _____ (All businesses in City)

WDID#: _____

(CONTINUED ON PAGE THREE)

Application for Business License- Page Three

Based on your type of business operation - Complete one of the following: (First year based upon estimate)

To be used by First Time Applicants (not for renewals)

Business License Tax Table	
Up to \$ 4,999	\$ 10.00
\$ 5,000 to \$ 29,999	\$ 30.00
\$ 30,000 to \$ 199,999	0.10 % of Gross Rcpts (Gross Rcpt x 0.001)
Over \$ 200,000	\$ 200.00 plus 0.04% of amount over \$ 200,000 [\$ 200 + (0.0004 x amount over \$ 200,000)]

A. Retail Sales, Services, Professionals, Contractors Etc. located in the City of Fort Bragg.

Estimate Gross Receipts Year 20 _____ : \$ _____

- | | | |
|--|-----------------|---|
| 1. Tax Based on Estimate Gross Receipts: | \$ _____ | See Business License Tax Table |
| 2. Business License Fee: | \$ 87.00 | |
| 3. State Mandated Fee: | \$ 4.00 | |
| Total Due (Add lines 1 + 2 +3): | \$ _____ | <u>Payment by Cash or Check only</u> |

B. Home Based Businesses in the City of Fort Bragg.

Estimate Gross Receipts Year 20 _____ : \$ _____

- | | | |
|--|-----------------|---|
| 1. Tax Based on Estimate Gross Receipts: | \$ _____ | See Business License Tax Table |
| 2. Business License Fee: | \$ 58.00 | |
| 3. State Mandated Fee: | \$ 4.00 | |
| Total Due (Add line 1 + 2 +3): | \$ _____ | <u>Payment by Cash or Check only</u> |

C. Business Outside City, (providing Services inside the City of Fort Bragg).

Estimate Gross Receipts Year 20 _____ : \$ _____

- | | | |
|--|-----------------|---|
| 1. Tax Based on Estimate Gross Receipts: | \$ _____ | See Business License Tax Table |
| 2. Business License Fee: | \$ 58.00 | |
| 3. State Mandated Fee: | \$ 4.00 | |
| Total Due (Add line 1 + 2 +3): | \$ _____ | <u>Payment by Cash or Check only</u> |

Employee Formula (for Category D & E Below – ONLY)	
First Person (including owners)	\$ 50.00
Next Five Employees	\$ 5.00 each
All additional employees	\$ 2.00 each

D. Wholesale manufactures, Common Carriers, Utility Company, Lumber brokers in the City of Fort Bragg.

Estimate Gross Receipts Year 20 _____ : \$ _____

- | | | |
|-------------------------------------|-----------------|---|
| 1. Tax Based on Number of Employee: | \$ _____ | See Business License Tax Table |
| 4. Business License Fee: | \$ 87.00 | |
| 4. State Mandated Fee: | \$ 4.00 | |
| Total Due: | \$ _____ | <u>Payment by Cash or Check only</u> |

E. Wholesale Manufacturers, Common Carriers, Utility Companies, Lumber Brokers not in the City of Fort Bragg.

Estimate Gross Receipts Year 20 _____ : \$ _____

- | | | |
|--------------------------------------|-----------------|---|
| 1. Tax Based on Number of Employees: | \$ _____ | See Business License Tax Table |
| 5. Business License Fee: | \$ 58.00 | |
| 5. State Mandated Fee: | \$ 4.00 | |
| Total Due: | \$ _____ | <u>Payment by Cash or Check only</u> |

All Other Business Types

*** State Mandated Disability Access & Education Fee of \$4.00 will be added to business rate below:**

F. **Vehicle Delivery Businesses:** (Flat Rate or based on Gross Receipts, complete A above) Flat Rate \$ 50.00 per year + fee + \$4.00
Peddler: (regular route with truck) Flat Rate \$ 75.00 per year + \$4.00
Peddler: (Solicitor peddling goods & wares from a temporary location \$20.00 per day) No. Days _____ x \$20.00 + \$4.00
TOTAL DUE _____

Taxi (First Vehicle) Flat Rate \$ 245 +DOJ fees+ \$4.00
Taxi (Additional Vehicles \$10.00 Each) No. Vehicles _____ x \$10.00 \$ _____

One Time Jobs (under \$2,000) TOTAL DUE: _____
 Flat Rate \$ 20.00 + 4.00 = \$24.00

Junk Dealer Flat Rate \$ 75.00 per year + \$4.00
Pawnbroker Flat Rate \$100.00 per year + \$4.00

Non-Profit Organizations Total Due: \$ 45.00 + \$4.00
(must provide proof of nonprofit status and list of officers)

Other Business Fees

Business Transfer Fee - Change of Owner Flat Rate \$ 78.00
Change of Business Location Flat Rate \$ 92.00
Business License Name Change Flat Rate \$ 13.00
Duplicate License Fee Flat Rate \$ 10.00
Expedited License Fee (2 days or less) \$ 149.00

CITY USE ONLY	
Local Agency Approvals	
Issuance of the herein referenced business license is hereby approved pursuant to and/or with the following conditions:	
_____	_____
Community Development Department	Public Works Department

CITY OF FORT BRAGG
BUSINESS LICENSE INFORMATION/DEFINITIONS
Fort Bragg Municipal Code
Title 5 Business Licenses and Regulations

PURPOSE:

This explanation is a summary designed to assist persons in completing an application for business license. It is NOT intended to be an exact copy of the Ordinance. Copies of Ordinances are available at City Hall or on the City website at <https://www.codepublishing.com/CA/FortBragg/>. (Title 5 – Business Licenses and Regulations)

LICENSE REQUIRED:

It is unlawful for any person to transact and carry on any business, trade, or profession without first having procured a license from the City to do so. **All business licenses expire on December 31st and must be renewed annually. Renewal notices are mailed at the beginning of each year.**

BUSINESS LICENSE ISSUANCE REQUIREMENTS:

Business Licenses are issued following clearance by Community Development personnel. The Community Development Department will check for Zoning regulations & Code requirements.

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Please contact the following for compliance with other Code Requirements:

- The Fort Bragg Fire Protection Authority, (707) 961-2830
- The Mendocino County Building Department, (707) 964-5379
- The Mendocino County Health Department (707) 964-4713
- The Mendocino County Business License Department (707) 234-6875

.....

INSTRUCTIONS OF CALCULATING BUSINESS LICENSE TAX & OTHER FEES

GROSS RECEIPTS:

Generally, the term “gross receipts” includes the total amount of the sale, service or transaction without deductions for any costs or other expenses. **The following are excluded from “gross receipts”:**

- (1) cash discounts taken on sales; (2) credit allowed on saleable trade-in property; (3) sales or use tax paid by purchaser; (4) refund of cash or credit; (5) amounts collected for others as agent or trustee, to the extent paid to the person for whom collected.**

AVERAGE NUMBER OF EMPLOYEES:

The average number of persons employed daily in the licensee’s business during the previous year, is determined by adding the total number of employees on the fifteenth day of each month, or on the day of the mid-month payroll period, and each of the preceding twelve months, and dividing the total by twelve.

LICENSE - TRANSFERRING LOCATION OR OWNERSHIP:

Transferring of the Business to a new owner shall be reported to the City on the application form and a fee shall be charged for transferring the license to a new ownership. Any person wishing to transact or carry on business at a place other than previously designated or where the location or type of the business is changed shall notify the City as to the change by completing the application form, and a fee shall be charged for amending the license. (See fee list on page 4.)

MANDATED STATE FEE – SB-1186 requires a four dollar (\$4.00) fee on all business license applications to increase disability access and compliance with construction-related accessibility requirements.

The following information may be helpful and answer some of the most frequently asked questions about starting a business.

Fictitious Business Name Filing: This process is completed through the Mendocino County offices located at 501 Low Gap Road in Ukiah, CA. Questions regarding filing need to be directed to the County Clerk Recorder at (707) 234-6822 or go to: <https://www.mendocinocounty.org/government/assessor-county-clerk-recorder-elections/county-clerk/fictitious-business-names>

Resale Number: This number may be required for purchasing supplies from a wholesaler. To verify if your business needs a resale number, you may obtain additional information from the California Tax & Fee Administration at 1-800-400-7115 or <https://www.cdtfa.ca.gov/> The nearest office is located in Santa Rosa.

Health Permit: If you are marketing a food item, a health permit is required. You may obtain these permits through the Mendocino County Department of Environmental Health, 120 W Fir Street in Fort Bragg, CA or call 707-961-2714. **A FORT BRAGG BUSINESS LICENSE WILL NOT BE ISSUED UNTIL A COPY OF THE HEALTH PERMIT IS RECEIVED IN OUR OFFICE.**

Federal and State Identification Numbers: All new businesses employing one or more persons must apply for a State Employer’s Identification number by contacting The State’s Employment Development Department at 1-888-745-3886 or visiting their website at <http://www.edd.ca.gov/>. Contact the IRS Business Tax line at 1-800-829-1040 or visit their website at www.irs.gov for more information.

California State License Number: Any business required by the State of California to obtain a license or certification from the State, must provide that number to the City prior to obtaining a business license ie: Accountants, Acupuncturists, Architects, Automotive Repair, Barbering & Cosmetology, Cemetery & Funeral, Chiropractic, Contractors, Dental Professions, Electric & Appliance Repair, Engineers & Land Surveyors, Geology, Hearing Aid Dispensers, Home Furnishings, Landscape Architects, Landscape Contractors, Lawyers, Medical Doctors, Midwives, Occupational Therapy, etc.

Stormwater Control Requirements: SB-205 requires a person applying to a city or a county for an initial business license or business license renewal, who conducts business operations as a regulated industry to demonstrate enrollment with the National Pollutant Discharge Elimination System (NPDES). Answers to frequently asked questions can be found online at: <https://www.cacities.org/Resources-Documents/Policy-Advocacy-Section/Legislative-Resources/SB-205-FAQ-Cities-Counties.aspx>
To find your businesses 4-digit SIC Code, go to: <https://www.naics.com/code-search/>

West Business Development Center – 345 N. Franklin Street, Fort Bragg (707) 964-7571 <https://www.westcenter.org/> Mission is to educate and advocate for small business so that local entrepreneurs receive the information they need to launch and expand their business.

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CITY OF FORT BRAGG **PHONE NO. (707) 961-2825**
FINANCE DEPARTMENT **FAX NO. (707) 961-2913**
416 N. FRANKLIN ST.
FORT BRAGG, CA 95437
.....

Revised: 04-16-2021



CITY OF FORT BRAGG

Incorporated August 5, 1889
416 N. Franklin Street
Fort Bragg, California 95437
tel. 707.961.2827
fax. 707.961.2802
www.fortbragg.com

LIMITED TERM PERMIT ACTION NOTIFICATION

This document provides notification of the decision as indicated below. If you have any questions, please contact the Community Development Department at City Hall.

APPLICATION NO.: Limited Term Permit (**LTP XX-22**)

PROPERTY OWNER: City of Fort Bragg

APPLICANT: City of Fort Bragg – Visit Fort Bragg Committee

REQUEST: Limited Term Permit to authorize busking (entertaining with music, dance, song, etc.) to occur on the first Friday of the month, December 2, 2022, through December 1, 2023, between the hours of 4:00 PM to 9:00 PM.

LOCATION: Downtown Fort Bragg

DATE OF ACTION: **November X, 2022**

ACTION BY: **XX** Community Development Director

ACTION TAKEN: Approved (See attached Findings and Conditions)

EFFECTIVE DATE OF ACTION: **November X, 2022**

LOCAL APPEAL PROCESS AND FEE: Decisions of the Community Development Director shall be final unless appealed to the Planning Commission in writing within 10 days of the decision date with a filing fee of \$1,000 to be filed with the Community Development Department.

NOTIFICATION MAILED TO: City of Fort Bragg
Att: Cristal Munoz
416 N. Franklin Street
Fort Bragg, CA 95437

DATE OF MAILING: November X, 2022

CONDITIONS OF APPROVAL: See attached findings and conditions

Community Development Department Statement: I hereby certify that conditions which must be met prior to issuance of this permit have been met and that this permit is deemed by the City of Fort Bragg Community Development Department to be a valid permit subject to all conditions of approval.

Community Development Director

Date

Statement of Responsible Party: I am responsible for assuring the temporary event is carried out in compliance with all applicable regulatory requirements, and I hereby certify that I have reviewed the conditions of approval and the project will be carried out in conformance with the specified conditions as attached.

Responsible Party

Date

Notice: This permit must be signed and returned to the Community Development Department.

Attachment: Findings and Conditions

FINDINGS AND CONDITIONS:

LTP **XX-22** has been approved based on the findings and conditions cited below:

FINDINGS

1. The proposed short term activity as described in the application and supplemental materials, as modified by any conditions of approval, is in conformity with the City of Fort Bragg's Inland Land Use and Development Code (ILUDC), including but not limited to all applicable standards of Section 18.71.030 of the Inland Land Use and Development Code, and the proposed short term activity will not adversely affect the environment;
2. The proposed project is a temporary use for a limited term and is compatible with existing uses on the property;
3. For the purposes of the environmental determination, this project has been determined to be exempt from further environmental review pursuant to the CEQA Guidelines, Section 15304(e), minor temporary use of land; and
4. The proposed location of the use and conditions under which it may be operated or maintained will not be detrimental to the public health, safety, or welfare, or materially injurious to properties or improvements in the vicinity.

STANDARD CONDITIONS

1. This action shall become final on the 11th working day following the decision unless an appeal to the City Council is filed pursuant to Chapter 18.92.030;
2. The application, along with supplemental exhibits and related material, shall be considered elements of this permit, and compliance therewith is mandatory, unless an amendment has been approved by the City;
3. This permit shall be subject to the securing of all necessary permits for the proposed development from City, County, State and Federal agencies having jurisdiction. All plans submitted with required permit applications shall be consistent with this approval;
4. This permit shall be subject to revocation or modification upon a finding of any one or more of the following:
 - A. That such permit was obtained or extended by fraud.
 - B. That one or more of the conditions upon which such permit was granted have been violated.
 - C. That the use for which the permit was granted is so conducted as to be detrimental to the public health, welfare or safety or as to be a nuisance.
 - D. A final judgment of a court of competent jurisdiction has declared one or more conditions to be void or ineffective, or has enjoined or otherwise prohibited the enforcement or operation of one or more conditions; and
5. The site occupied by the short term activity shall be cleaned of debris, litter, or other evidence of the temporary activity on completion or removal of the activity, and shall thereafter be used in compliance with this Development Code.

SPECIAL CONDITIONS

1. This permit is granted for a limited term and is valid the first Friday of every month beginning December 2, 2022, through December 1, 2023, between the hours of 4:00 PM to 9:00 PM.
2. Interested performers shall complete and submit a VFB First Friday Busking Application. Please contact Cristal Munoz at cmunoz@fortbragg.com or 707-961-2823 x103.
3. Buskers shall secure a business license if receiving payment from VFB Committee (otherwise, tip jars are allowed).
4. NO electrical connections to structures shall be allowed.

5. Buskers shall only be allowed where there is adequate room to accommodate normal pedestrian and handicapped access. In all cases doorways must not be impeded and a minimum width of 4 feet clearance must be maintained.
6. This permit may be suspended at any time to avoid conflicts with activities in the public right-of-way, such as construction, parades, or emergencies.
7. Busking shall not negatively impact health, safety or public welfare – no use of vulgarity, profane language, aggressive quips, etc.
8. During the event, an approved VFB First Friday Busking Application shall be available upon request.
9. The City of Fort Bragg, its employees, officers, and volunteers are not responsible for and shall be held harmless and fully indemnified by the user for any claims arising out of accidents, personal injury, damage to or loss of personal property, or wrongful death that occur during or result partially or entirely from use of City facilities.
10. The indemnification provided by this paragraph shall cover all acts whether negligent, grossly negligent or intentional. The City shall be allowed to select legal counsel and be reimbursed for legal costs for any matter covered by this paragraph.



City of Fort Bragg

416 N Franklin Street
Fort Bragg, CA 95437
Phone: (707) 961-2823
Fax: (707) 961-2802

Text File

File Number: 22-575

Agenda Date: 11/10/2022

Version: 1

Status: Business

In Control: Special Meetings

File Type: Staff Report

Agenda Number: 3E.

Review Visit Fort Bragg Membership Status Application and Direct Staff to Publicize the Open Seats and Application Materials to Appoint New (or Returning) Members in December 2022



CITY OF FORT BRAGG

416 N. FRANKLIN, FORT BRAGG, CA 95437
PHONE 707/961-2823 FAX 707/961-2802

COUNCIL COMMITTEE ITEM SUMMARY REPORT

Meeting Date: November 10, 2022
To: Visit Fort Bragg Committee
From: Cristal Munoz, Administrative Analyst
Agenda Item Title: Visit Fort Bragg Committee Membership

BACKGROUND AND OVERVIEW:

The Visit Fort Bragg Committee (VFB) is comprised of five to seven members of the public and two Councilmembers, appointed in terms of continuity. The table below shows the current membership and terms of service:

Member	Sector	Term
Jessica Morsell-Haye	Councilmember	Mayor Appointment
Tess Albin-Smith	Councilmember	Mayor Appointment
Nancy Bennett	Dining	24 months – expires 12/31/22
Barb Bruce	Other	24 months – expires 12/31/22
Megan Caron	Retail	24 months – expires 12/31/22
Debra DeGraw	Restaurant	24 months – expires 12/31/23
Alison de Grassi	Recreation/Attraction	24 months – expires 12/31/23
Jason Hurst	Lodging	24 months – expires 12/31/23
Tonda Fochs	Retail	24 months – expires 12/31/23

Three members' terms will expire at the end of 2022. On November 10, 2022, staff will open seats via social media, press releases, and on the City website. Staff will also contact the individuals that will be termed out by the end of the year and see if they would like to reapply. The VFB protocols allow past members to reapply. Applications will close on December 2, 2022, at 5 pm.

At the next regular meeting, the current VFB committee will have the opportunity to ask candidates questions to determine appointments. The VFB protocols are also attached to guide decision-making (Attachment 1 -VFB Protocols).

STAFF RECOMMENDATION:

Proceed with recruitment for the available three positions on the Visit Fort Bragg committee. Appoint new members to VFB at the next regular meeting on December 8, 2022.

ATTACHMENTS:

1. Visit Fort Bragg Committee Protocols (Reviewed December 21, 2020)
2. Visit Fort Bragg Application (fillable form)

Visit Fort Bragg Committee Protocols

Created January 17, 2018

Amended November 19, 2019

Reviewed December 21, 2020

I. Purpose

The purpose of these protocols is to provide rules and procedures for conducting all Visit Fort Bragg Committee meetings, operations and performance of duties. Visit Fort Bragg is an advisory committee to the City of Fort Bragg; the project manager and VFB are supervised by City staff from the Community Development Department.

The purpose of the Visit Fort Bragg (VFB) Committee is to promote Fort Bragg, California as a travel and retail destination for the expressed purpose of increasing spending within the city, generating additional tax revenues from increased travel and retail spending and sustaining and expanding tourism and retail income and employment within Fort Bragg.

II. Members

- a. The VFB shall be composed of up to 9 members—7 from the community and 2 councilmembers.
- b. Members should represent a cross section of the Fort Bragg tourism sector. Ideally (but not mandatory) the Committee would be comprised of a cross-section of the sectors below. Achieving a diversity of interests should be considered when reviewing applications for membership.
 - i. Lodging with representation from both large and small establishments; branded and not branded
 - ii. Retail
 - iii. Dining
 - iv. Recreation/Attraction
 - v. Art/Culture
 - vi. Other
- c. Members are not required to reside in Fort Bragg city limits.
- d. Members may be nominated by City representatives and committee members. Members may be recommended to the committee by community members.
- e. Potential members are required to complete the current VFB Committee Membership Interest form.
- f. Members are required to complete the current VFB Committee Member Conflict of Interest Disclosure Form. The purpose of this form is to provide full transparency about committee members' interest and affiliations. The forms will be reviewed by City staff.
- g. New members must be approved by the City Council representatives on the Visit Fort Bragg Committee.
- h. If committee membership is full, the committee may consider rotating members or increasing membership.

III. Sub-Committees

All VFB committee members will be encouraged to join a subcommittee or ad hoc committee. This is not mandatory.

Members of sub-committees are not limited to VFB committee members. Sub-committees can include community members or any other person outside the VFB committee. Examples of sub-committees could include Special Events, Marketing, Website, etc.

IV. Meetings

- a. All regular meetings shall be scheduled, agenzized, conducted and posted in accordance with the City’s public meeting noticing procedures and sent to all committee members.
- b. VFB will hold bi-monthly meetings, unless rescheduled. Each meeting will be on a regular schedule at a date and time convenient to the majority of members unless otherwise noted.
- c. The regular meeting place of VFB shall be at the City of Fort Bragg Town Hall located at 363 N. Main Street or other public place as agreed.
- d. A special meeting of the VFB may be called by the Project Manager or by a majority vote of the members or by City staff.
- e. Each member of the VFB is expected to attend all regular meetings. If any member misses three consecutive meetings, that member may be eligible for removal from office with a majority vote of the Committee.

V. Financial

- a. The committee may recommend expenditures to the project manager and to City staff for consideration and discussion.

VI. Voting

- a. Voting will be subject to Brown Act voting procedures.

VII. Amendments

- a. These protocols may be amended at any time by a majority vote of the committee.

FORT BRAGG

NORTH COAST CALIFORNIA



Visit Fort Bragg Committee Application

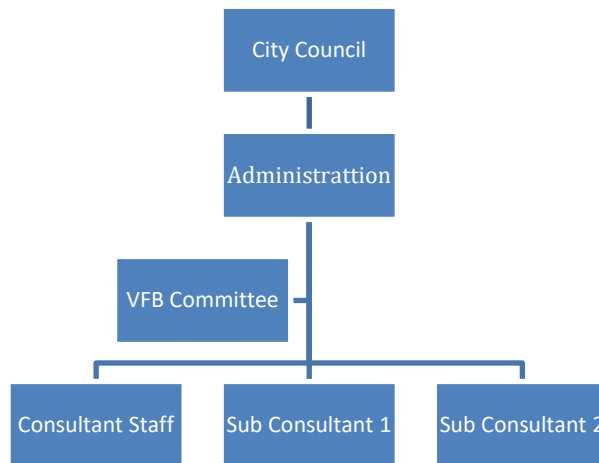
Visit Fort Bragg inspires visitors to enjoy Fort Bragg through comprehensive and collaborative outreach, ultimately increasing visitor spending and stimulating the local economy.

The City of Fort Bragg is currently seeking committed, inspired big-picture thinkers to help bring the mission to life. Applicants should represent some aspect of Fort Bragg’s Tourism Economy with a focus on the lodging industry.

Board Commitment: Currently meetings will be held monthly. Meetings are regularly scheduled for the second Tuesday of every month at 11:00 am.

This Committee is subject to the Ralph M. Brown Act. Members are expected to fully comply with all applicable laws and regulations related to the Brown Act. (assistance with adherence to the Brown Act will be provided by City staff). As the Committee is subject to the “Brown Act”, information on this application is subject to the CA Public Records Act and related regulations.

The Committee is comprised of 5-7 community members serving staggering terms of 2 years.



Applications are due Friday, December 02, 2022. To submit an application or for more information please contact Cristal Munoz at cmunoz@fortbragg.com or (707) 961-2823 x103.

Only completed applications will be brought forward to the Visit Fort Bragg Committee for consideration. Supplemental information supporting the application is welcome.

APPLICATION

Name:

Company:

Mailing Address:

Email Address:

Phone Number:

- 1. Why would you like to be on the Visit Fort Bragg Committee?**
- 2. Briefly describe your vision for Fort Bragg's Tourism Economy over the next 3-5 years.**
- 3. What are some of your prior board/committee experiences?**
- 4. What is your experience and expertise in strategic planning, budgeting and destination marketing?**
- 5. What does success for this Committee look like to you?**