

City of Norwalk  
Finance Department  
12700 Norwalk Blvd.  
Norwalk, CA 90651-1030  
(562) 929-5713  
www.ci.norwalk.ca.us



PROFESSIONS – BASED ON PERSONNEL  
LICENSE FEE SCHEDULE

NAME OF BUSINESS \_\_\_\_\_ LICENSE No. \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
\_\_\_\_\_

1) BUSINESS (OR FIRST PARTNER) – PLUS ONE (1) EMPLOYEE \$ 65.00

2) EACH SECOND OR ADDITIONAL (ACTIVE) **PRINCIPAL OR PARTNER**

NUMBER \_\_\_\_\_ AT \$15.00 EACH \$ \_\_\_\_\_

3) FIRST FOUR (4) EMPLOYEES IN EXCESS OF ONE (1)

NUMBER \_\_\_\_\_ AT \$6.00 EACH \$ \_\_\_\_\_

4) NEXT TWENTY (20) EMPLOYEES IN EXCESS OF (5)

NUMBER \_\_\_\_\_ AT \$3.00 EACH \$ \_\_\_\_\_

5) EACH EMPLOYEE IN EXCESS OF TWENTY-FIVE (25)

NUMBER \_\_\_\_\_ AT \$1.50 EACH \$ \_\_\_\_\_

6) **TOTAL CURRENT YEAR'S TAX** (LINE 1 THROUGH 5) \$ \_\_\_\_\_

7) **TOTAL DUE CITY OF NORWALK** \$ \_\_\_\_\_

I HEREBY DECLARE, UNDER PENALTY OF PERJURY, that this return is true and correct to the best of my knowledge and belief.

EXECUTED AT \_\_\_\_\_, \_\_\_\_\_, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_  
City State

\_\_\_\_\_  
SIGNATURE: OWNER, MANAGER, PAYROLL,  
AUDITOR, AUTHORIZED AGENT

Make check payable to the City of Norwalk, Norwalk City Hall, P.O. Box 1030, Norwalk, CA 90651-1030.  
Mail check along with this Statement and Business License Application form to the above address, Attention: Business License Division.