



# CONTRACTOR BUSINESS LICENSE

City of Larkspur Building Department  
400 Magnolia Ave.  
Larkspur, CA 94939  
(415) 927-5038

OFFICE USE ONLY

DATE REC: \_\_\_\_\_

EXP DATE: \_\_\_\_\_

RECEIPT NO.: \_\_\_\_\_

ENTERED BY: \_\_\_\_\_

Date: \_\_\_\_\_

Business Name (DBA): \_\_\_\_\_

Owner/Officer Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Email: \_\_\_\_\_

California State Contractor's License No.: \_\_\_\_\_ Class: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Term (check one):            4 months - \$30

1 year - \$60

California Licensed contractor or Authorized Agent Signature:

SIGNATURE

PRINT NAME

DATE

I represent the:

Contractor

Authorized Agent (Please provide a signed "Agent Authorization Form" or letter)

PLEASE NOTE THAT ALL SUB-CONTRACTORS ARE REQUIRED TO OBTAIN BUSINESS LICENSES Larkspur Municipal Code Section 5.24.070

For additional information, forms & documents please visit us on the web at: [City of Larkspur Building Department](#)