



CITY OF INGLEWOOD

ONE MANCHESTER BOULEVARD
INGLEWOOD, CA 90301 – (310) 412-5500
www.cityofinglewood.org

RESIDENTIAL RENTAL BUSINESS TAX APPLICATION

OFFICE USE ONLY

Customer No. _____
Activity No. _____
Entered by _____
Zoning _____
Zoning Sign-off _____
Date _____

PLEASE SEE THE ATTACHED INSTRUCTION SHEET ON THE LAST PAGE OF THIS APPLICATION PACKET FOR AN EXPLANATION OF ALL NUMBERED ITEMS.

APPLICATION DATE: _____

1) OWNER'S NAME(S): _____

2) ADDRESS OF RENTAL PROPERTY: _____

(Number)

(Street)

(Suite)

CITY: INGLEWOOD STATE: CALIFORNIA ZIP CODE: _____

3) MAILING ADDRESS: _____

(Number)

(Street)

(Suite)

MAIL CITY: _____ MAIL STATE: _____ MAIL ZIP CODE: _____

PHONE NUMBER () _____ FAX NUMBER () _____ E-MAIL ADDRESS: _____

4) ASSESSOR'S IDENTIFICATION NUMBER (AIN): _____ 5) PARCEL OWNERSHIP DATE: _____

6) NUMBER OF UNITS: _____ 7) DOES OWNER OCCUPY UNIT?: YES NO 8) ALARM?: YES NO

9) TYPE OF OWNERSHIP: CORP LLC PARTNERSHIP SOLE OWNER TRUST OTHER: _____

FEDERAL TAX ID NUMBER: _____

(IF CORPORATION, LIMITED LIABILITY CORP OR TRUST)

10) Owners, Partners or Corporate Officers: (attach additional sheet if needed)

OWNER NAME: _____ TITLE: _____ DRIVER LIC. NO. _____

HOME ADDRESS: _____

(Number)

(Street)

(Unit)

PHONE NO. () _____

CITY: _____ STATE: _____ ZIP CODE: _____ CELL PHONE () _____

EMAIL ADDRESS _____

OWNER NAME: _____ TITLE: _____ DRIVER LIC. NO. _____

HOME ADDRESS: _____

(Number)

(Street)

(Unit)

PHONE NO. () _____

CITY: _____ STATE: _____ ZIP CODE: _____ CELL PHONE () _____

EMAIL ADDRESS _____

TAX CALCULATION

11) RENTAL UNITS: (Please see the instruction sheet on the last page of this application)

11) NUMBER OF UNITS: _____

12) AMOUNT OF TAX DUE (Multiply the number of units by \$20.00 per unit)

12) AMOUNT OF TAX DUE: _____

13) PAST DUE TAX (This will be calculated from the parcel ownership date)

13) PAST DUE TAX: _____

14) PENALTY (Please see the instruction sheet on the last page of this application)

14) PENALTY: _____

15) FIRE INSPECTION FEE (\$50.00 for any property that has 3 or more units)

15) FIRE INSP. FEE: _____

16) STATE DISABILITY ACCESS FUND (See instruction sheet for more info)

16) SENATE BILL 1186 FEE: \$4.00

17) TOTAL DUE (Please add up lines 12 thru 16 and place in the total due section)

17) TOTAL DUE: _____

I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE STATE OF CALIFORNIA, THAT THE INFORMATION IN THIS APPLICATION

APPLICANT'S PRINTED NAME: _____ TITLE: _____

APPLICANT SIGNATURE: _____ DATE: _____

(1) Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:

- The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx.
- The Department of Rehabilitation at www.rehab.cahwnet.gov.
- The California Commission on Disability Access at www.cdda.ca.gov.

PLEASE COMPLETE THE FOLLOWING REQUIRED INFORMATION - (You must write N/A for each that do not apply)

PROPERTY MANAGER / MANAGEMENT FIRM

NAME: _____ PHONE NUMBER () _____

ADDRESS: _____
(Number) (Street) (Suite)

CITY: _____ STATE: _____ ZIP CODE: _____

BUILDING MAINTENANCE SERVICE PROVIDER

NAME: _____ PHONE NUMBER () _____

ADDRESS: _____
(Number) (Street) (Suite)

CITY: _____ STATE: _____ ZIP CODE: _____

LANDSCAPING / GARDENING SERVICE PROVIDER

NAME: _____ PHONE NUMBER () _____

ADDRESS: _____
(Number) (Street) (Suite)

CITY: _____ STATE: _____ ZIP CODE: _____

WASHING MACHINE SERVICE PROVIDER

NAME: _____ PHONE NUMBER () _____

ADDRESS: _____
(Number) (Street) (Suite)

CITY: _____ STATE: _____ ZIP CODE: _____

INSTRUCTIONS FOR COMPLETING NEW RENTAL APPLICATION

- 1) The property owner name(s) should be written exactly as it is written on the property title that is registered with the Los Angeles County Assessor's office.
- 2) Enter the address of the rental property exactly as it appears on the parcel address on file with the Los Angeles County Assessor's office.
- 3) This is the mailing address that you would like all notices sent. Please note that it is your responsibility to update the mail address directly with the business tax section. It is also your responsibility to notify our office if you do not receive your annual renewal.
- 4) Enter the Assessor's Identification Number (AIN) exactly as it is filed with the Los Angeles County Assessor's office. Please note that separate parcel numbers will mean that you will need separate residential rental business tax applications.
- 5) This is the date that the grant deed was recorded with the Los Angeles County Assessor's office and is the date that you legally became owner of the subject property.
- 6) The number of units must match the number of units on file with the Los Angeles County Assessor's office.
- 7) Only an owner specifically listed on the title can be considered an owner that can occupy a given unit.
- 8) If the subject property has an alarm system, then an Inglewood Alarm System Permit will be needed.
- 9) The type of ownership refers to how the ownership of the subject property is legally recognized. Please pick one of the following:

Sole ownership: The property is owned by only one individual.

Partnership: The property is owned by more than one owner. Please note that any change to the individuals that own this property will require a new business tax application.

Corporation: The Corporation should be reflected in the county records and "Inc." will be part of the name on the title.

Limited liability: The Limited Liability Company should be reflected in the county records and "L.L.C." will be part of the name on the title.

Trust: The trust should be reflected in the county records and "trust" will be part of the name on the title.

Other: This can include estates, limited partnerships and limited liability partnerships but in any case should be reflected in the county records.

Please note that the ownership should be reflected on the property title that is registered with the Los Angeles County Assessor's office.

- 10) For sole ownership and partnership all owners must be listed on the application. For corporations and limited liability companies at least two corporate officers must be listed on the application. For an estate or trust an executor must be listed on the application.
- 11) The number of units must list all of the units that are on the parcel records minus any owner occupied units. Please note that only owners specifically listed on the title can be exempt from the tax requirement. Also, the Los Angeles County records should not reflect that this is an "absentee parcel" for any location that would like to request an owner occupied exemption.
- 12) The tax rate is \$20.00 per unit.
- 13) The City will calculate any past due taxes that will be calculated from the parcel ownership date if you did not register on time.
- 14) All persons that conduct the business of operating a residential rental within the City of Inglewood without registering and paying the appropriate taxes within 30 days of the parcel ownership date will be required to pay a 20% penalty. Any business that was issued a Notice of Violation for not registering and paying the appropriate taxes will start at a 20% penalty and will go up by 10% percent per month for a maximum penalty of 50% of the taxes due.
- 15) The \$50.00 fire inspection fee is due for all residential rentals that have 3 or more units. This is a onetime fee and will not show up on the annual renewal.
- 16) On September 19, 2012 Governor Brown signed into law SB-1186 which imposes a State fee of \$4.00 on every applicant for a local business license or renewal. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop educational resources for businesses in order to facilitate compliance with federal and state disability laws, as specified. This law requires the \$4.00 State fee to be collected by all cities and counties within California.
- 17) Please add up the taxes and fees from lines 12 thru 16 and place the total amount due on this line. This should be paid in person as the City of Inglewood does not accept new applications via mail.

Be sure to sign and date this form. This application can only be submitted in person as a zoning sign-off is required from the Planning and Zoning Department. The Inglewood City Hall can be found at the following address:

**CITY OF INGLEWOOD
BUSINESS TAX SECTION
ONE MANCHESTER BLVD, 1ST FLOOR
INGLEWOOD, CA 90301**

Phone Number: (310) 412-5500

Website: www.cityofinglewood.org

Hours of Operation: Monday – Thursday 7:30 a.m. – 5:30 p.m.

IMPORTANT INFORMATION:

- You are required to file and pay the annual business tax renewal on or before the last day of January each and every year.
- It is your responsibility to notify our office if you do not receive the annual renewal.
- Once you have sold your rental property, it is also your responsibility to notify our office in writing to close your account.