



**City of Auburn**  
Administrative Services  
1225 Lincoln Way, Auburn, CA 95603  
Tel: 530-823-4211, Fax: 530-823-4209

# TOBACCO RETAILER LICENSE APPLICATION

**Tobacco Retailer License Fee is \$850**

**Please note: This application will not be processed without licensing fee. If it is incomplete or incorrect the information on this application must match the information on your Business License**

NEW APPLICATION       RENEWAL       THIS IS A CHANGE IN OWNERSHIP

**RENEWAL**

THIS IS A CHANGE IN OWNERSHIP

Business Name: \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone Number \_\_\_\_\_

Is the retail business owned by a (check one):  Sole Proprietor  Partnership  Corporation or  LLC

Business License#

Provide the information below for the Sole Proprietor, Partnership, Corporation or LLC checked above:

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Driver's Lic #: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_

Email \_\_\_\_\_

I have read and understand all requirements of Auburn Municipal Code Chapter 122. I declare under penalty and perjury under the laws of the State of California that the foregoing is true and correct.

Signature Printed Name Title Date

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Signature	Printed Name	Title	Date
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If a partnership, all authorized partners must sign. If a corporation, an authorized officer must sign.

se return the completed application with a check or money order of \$850 to: City of Auburn, 1225 Lincoln Way, Room 1, Auburn, CA 95603

**Signature** **Printed Name** **Title** **Date**

CURRENT BL       APPROVED       DENIED