



City of Goleta
Cannabis Business License Tax Registration
 Finance Department | 130 Cremona Drive, Suite B, Goleta CA, 93117
 financegroup@cityofgoleta.org | (805) 961-7500

Cannabis License Type Designation:

- Adult-Use Medicinal

Cannabis Operation Type:

- Cultivation Distribution Manufacturing Microbusiness
 Retail Testing Non-Store Front Retail (Delivery)

Business Information:

Legal Business Name:	Doing Business As <i>(if applicable)</i> :
Storefront Business Name (if applicable and different than above):	
Business Location Address (Do not use P.O. Box):	City, State, Zip Code:
Business Telephone:	Business Email Address:
Business Website:	
Federal Tax ID:	State Sales Tax No:

Primary Contact Person *(This will be the contact person for any questions regarding financial operations, taxes and reporting):*

Name:	Title:
Mailing Address:	City, State, Zip Code:
CA Driver's License Number:	Date of Birth:
Primary Phone Number:	Email Address:

I declare, under penalty of perjury, that the above is true and correct to the best of my knowledge and belief.

Authorized Signature

Date of Signature

Printed Name

Title

City Use Only:

Cannabis Business License Number: _____	Cannabis Tax Certificate Number: _____
Finance Review: <input type="checkbox"/> Approved <input type="checkbox"/> Pending <input type="checkbox"/> Denied <input type="checkbox"/> Incomplete Date: _____ Initial: _____	