



**REVENUE DIVISION
39550 LIBERTY STREET
FREMONT, CA. 94538**

APPLICATION FOR TEMPORARY BUSINESS TAX LICENSE

VENDOR'S NAME: _____

VENDOR'S BUSINESS
ADDRESS: _____

ITEMS TO BE SOLD/
SERVICES PROVIDED: _____

DATE(S) OF EVENT: April 26, 2025 - Arts Mosaic Fair

CHECK NUMBER: _____

(RETURN COMPLETED APPLICATION FORM WITH \$5.00 PAYMENT TO THE CITY OF FREMONT AT THE ADDRESS LISTED ABOVE)