

Environmental Health Services 2000 Alameda de las Pulgas, Suite #100 San Mateo, CA 94403 Phone: (650) 372-6200 | Fax: (650) 627-8244 smchealth.org/eh

FEE EXEMPTION AFFIDAVIT

Complete the following form if your business is eligible for a fee exemption.

BUSINESS INFORMATION		
Business Name:		
Business Address:		
City:	State:	Zip Code:
Mailing Address:		
City:	State:	Zip Code:
Phone Number:	Business Email:	
OWNER INFORMATION		
Owner Name:		
Owner Address:		
City:	State:	Zip Code:
Phone Number:	Email:	
EXEMPTION		

Select your exemption status below, and provide any additional documentation required to verify your status.

Blind Person: Any business or activity operated by a blind person who has a certificate issued by the Bureau of Vocational Rehabilitation of the State of California (San Mateo County Ordinance, Title 5, Chapter 5.64.060(e)(1)).
Include a copy of your certificate issued by the Bureau of Vocational Rehabilitation.

✓ Veteran: Every soldier, sailor, or marine of the United States who has received an honorable discharge or a release from active duty under honorable conditions from such service may hawk, peddle, and vend any goods, wares, or merchandise owned by him, except spirituous, malt, vinous, or other intoxicating liquor, without payment of any license, tax, or fee whatsoever, whether municipal, county, or State, and the Board of Supervisors shall issue to such soldier, sailor, or marine, without cost, a license therefore (State of California Business and Professionals Code, Section 16102). *Note: This code only exempts veterans from fees associated with selling goods, not services.* Include a copy of your honorable discharge or release from active duty.

501(c)(3): Any state-registered or tax-exempt person or organization operating exclusively for a charitable purpose. A business or activity defined in Section 5.64.050 where no person benefits through the distribution of profits or other compensation (San Mateo County Ordinance, Title 5, Chapter 5.64.060(e)(2)).
Include a letter from the IRS with recognition of exemption under section 501(c)(3).
If claiming this exemption, complete the additional 501(c)(3) questions on the following page.

501(c)(3) QUESTIONS

1. What is your current tax-exempt identification number?

2. Is your organization entirely supported by tax revenues? If yes, not exempt.

🗌 Yes 🗌 No

3. If a school, do you receive any California Department of Food and Agriculture funds for your student meal program? If yes, not exempt.

🗌 Yes 🗌 No

- 4. Are staff paid? If yes, not exempt.
 - 🗌 Yes 🗌 No
- 5. Is money received for products or services, i.e., is anything sold? If yes, not exempt.

	Yes		No
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6. If yes to question #5 above, are ALL of the proceeds donated to a charitable organization? If no, not exempt.

🗌 Yes 🗌 No

7. For a fundraising exemption, are ALL of the proceeds being donated to a charitable organization as part of a fundraiser (California Retail Food Code Section 113789 (c)(4) fee exemption)? If yes, fee exempt.

🗌 Yes 🗌 No

DECLARATION

By submitting this form, you declare under penalty of perjury under the laws of the State of California that the above information is true and correct and that you are legally authorized to act on behalf of the Business.

Name:

Date:

Signature: