



COMMUNITY DEVELOPMENT DEPARTMENT  
(530) 661-5820

300 FIRST STREET  
(530) 406-0832 FAX

WOODLAND, CA 95695  
<http://www.cityofwoodland.gov>

**LETTER OF AUTHORIZATION**  
FOR A HOME OCCUPATON BUSINESS LICENSE

*This is to be filled out by either the property owner or management company in order to allow the below mentioned to operate a home business at the listed address.*

Date: \_\_\_\_\_

CITY OF WOODLAND BUSINESS LICENSE DEPARTMENT

\_\_\_\_\_, hereby authorizes  
Name of Property Owner or Management Company

\_\_\_\_\_, to operate a home based  
Name of Renter or Leasee

business at the following property: \_\_\_\_\_.  
Home Business Address

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title (Owner, Manager, etc.)