Finance Department
Revenue Development

UTILITY USERS TAX REGISTRATION FORM

Reset Form

Pursuant to Berkeley Municipal Code Chapter 7.70
To be completed by the utility service provider

Instructions on how to complete this form are available on page 2.

REQUEST TYPE (select one): ☐ New Registration ☐ Updating Existing Registration

SERVICE TYPE (select all that apply):

☐ Cable Television ☐ Electric ☐ Gas ☐ Prepaid Wireless / Cell Phone ☐ Telephone

☐ Video Streaming ☐ Voice Over IP (VoIP) ☐ Wireless Cell Phone

SERVICE PROVIDER CONTACT INFORMATION

CORPORATE:
Company or Organization Name: _____ Year Est.: _____
Legal Name (same as on your Income Tax return): _____
Street Address: _____ City / Town: _____
State / Province / Region: _____ Postal Code: _____ Country: _____
Phone #: _____ Email Address: _____

LOCAL: ☐ Check if same as CORPORATE
Company or Organization Name: _____ Year Est.: _____
Legal Name (same as on your Income Tax return): _____
Street Address: _____ City / Town: _____
State / Province / Region: _____ Postal Code: _____ Country: _____
Phone #: _____ Email Address: _____

ENTITY TYPE (select one):
☐ Sole Proprietor ☐ LLC ☐ C Corp ☐ S Corp ☐ Partnership ☐ Nonprofit ☐ Other (specify) _____

FEIN, TIN, or SSN: _____

Do you have a current City of Berkeley Business License? ☐ Yes ☐ No ☐ Pending

If Yes, **City of Berkeley Business License #**:_____

CERTIFICATION

Under penalty of perjury, I certify that all information provided is true and correct to the best of my knowledge and belief.

Printed Name: _____ Title: _____

Phone # _____ Email: _____

Signature: _____ Date: _____

Mailing Address:
City of Berkeley
Finance Department – Revenue Development
2180 Milvia Street, 3rd Floor
Berkeley, CA 94704

Taxpayer Assistance:
Tel (Within Berkeley): Call 311
Tel (Outside Berkeley): (510) 981-7349
TDD: (510) 981-6903
E-mail: uut@berkeleyca.gov
Web: berkeleyca.gov/special-business-taxes

INSTRUCTIONS

Pursuant to Berkeley Municipal Code Chapter 7.70, the City of Berkeley imposes a tax on the use of telephone, gas, electric, cable television, cellular telephone, and video streaming services in the City of Berkeley. This tax is known as the Utility Users Tax, and the current tax rate is 7.5%.

REQUEST TYPE: Select whether you are registering a completely new provider account or updating an existing registration.

SERVICE TYPE: Check the box next to each service your utility company provides to users within the City of Berkeley. Select all that apply.

Service Type	BMC	Definition
Cable Television	7.70.075	Multi-channel video programming delivered to subscribers via a physical, local wired network connection or fiber-optic distribution system.
Electric	7.70.060	Electrical energy delivered through a power grid or distribution system used to power properties, facilities, or charging systems.
Gas	7.70.070	Natural gas or manufactured gas supplied through a pipeline system used for heating, cooking, or industrial power.
Pre-paid Wireless/Cell Phone	7.70.050	Mobile cellular services purchased in advance of usage via cards, digital top-ups, or pre-allocated monthly plans.
Telephone	7.70.050	Traditional wireline or landline communications transmitting voice, data, or information through a physical connection.
Video Streaming	7.70.075	Digital video programming delivered over the internet, including commercial on-demand content and live broadcast streams.
Voice Over IP (VoIP)	7.70.050	Voice communication services routed over a broadband internet connection instead of traditional analog phone lines.
Wireless Cell Phone	7.70.050	Standard post-paid communication services utilizing cellular or radio frequencies to transmit voice, text, or data over mobile devices.

SERVICE PROVIDER CONTACT INFORMATION

CORPORATE: Enter the centralized business information for your parent entity or main headquarters. This includes the legal company name exactly as it appears on your federal income tax returns, the main administrative street address, and core contact details.

LOCAL: Provide contact information for the specific individual or regional office who will serve as our primary operational contact. **This is the designated person we will actively work and communicate with** for day-to-day administration, tax reporting questions, and account verification. If this matches your headquarters information, check the **Check if same as CORPORATE** box.

ENTITY TYPE: Select the legal organization structure under which your business operates. If your company structure is not listed, check **Other** and explicitly write in the designation.

FEIN, TIN, or SSN: Provide your 9-digit Federal Employer Identification Number (FEIN) or Taxpayer Identification Number (TIN). If you are registering as a Sole Proprietor and do not have a FEIN, you must provide your Social Security Number (SSN) as your tax identification number.

City of Berkeley Business License: Check the appropriate box. If you already possess an active license, you must provide your current **Business License #** on the line provided.

CERTIFICATION

An authorized representative must print their name, title, and contact information, then sign and date the form. By signing, you certify under penalty of perjury under the laws of the State of California that all information provided is true, correct, and complete to the best of your knowledge and belief.