

Return Application To:  
DLSE Licensing  
1515 Clay St., STE 1902  
Oakland, CA 94612

State of California  
Department Of Industrial Relations  
LABOR COMMISSIONER'S OFFICE (DLSE)



**APPLICATION FOR INDUSTRIAL HOMEWORK LICENSE**

- CORPORATION  
 PARTNERSHIP  
 INDIVIDUAL

FIRM NAME

ADDRESS

TELEPHONE

OWNER, MANAGER OR OFFICER OF CORPORATION – NAME AND TITLE

THIS IS AN APPLICATION FOR A  
 NEW LICENSE  RENEWAL LICENSE

IF RENEWAL, NUMBER OF  
HOMEWORKERS EMPLOYED LAST YEAR:

FACTORY PRODUCT(S)

NO. OF EMPLOYEES  
IN FACTORY:

HOMEWORK PRODUCT(S)

OPERATION

- HANDWORK  MACHINE

NO. OF HOMEWORKERS  
TO BE EMPLOYED:

AS A MANUFACTURER,  
ARE YOU SUBJECT TO:

FEDERAL WAGE AND HOUR REGULATIONS?

- YES  NO

THE PROVISIONS OF THE FEDERAL WALSH-HEALEY PUBLIC  
CONTRACTS ACT RELATING TO THE EMPLOYMENT OF  
HOMEWORKERS?

- YES  NO

NOTE: Your homework license is valid only for the products or operations described on this application. Any additional products or change in operation initiated after the license is granted must be submitted to and approved in advance by this division. Wage rates must meet the state or federal minimum wage, whichever is higher.

RATES TO BE PAID:

HOURLY RATES  
\$

PIECEWORK RATES  
\$

BRIEF DESCRIPTION OF ARTICLES TO BE MANUFACTURED AND OPERATIONS INVOLVED

IF PIECEWORK  
RATE Estimated Time  
Required for  
Each Task

Is homework to be delivered  
and collected by firm?

- YES  NO

If your answer is "NO", travel time for homeworkers may be considered to be work time.

DO YOU GIVE OUT  
CONTRACT WORK TO  
MANUFACTURERS?

- YES  NO

NAME AND ADDRESS OF MANUFACTURER

NAME AND ADDRESS OF MANUFACTURER

ARE YOU A  
SUBCONTRACTOR?

- YES  NO

FOR WHOM? (NAME AND ADDRESS)

FOR WHOM? (NAME AND ADDRESS)

WORKERS' COMPENSATION  
INSURANCE FOR  
HOMEWORKERS:

NAME OF INSURANCE COMPANY

POLICY NUMBER

EXPIRATION DATE

I agree to comply with Labor Code Sections 2650 to 2667 and any prohibitory order enacted there under and to abide by the rules and regulations governing industrial homework. I certify that none of the prohibited articles listed in Labor Code section 2651 will be distributed by me to be manufactured by industrial homework.

EMPLOYER'S SIGNATURE

TITLE

DATE

Date Fee Recd: \_\_\_\_\_  
Amt. of Fee \$ \_\_\_\_\_  
File No. \_\_\_\_\_

Deputy's Approval  
Recommendation  
Initials:  
Date:

Supvr's Approval  
Recommendation  
Initials:  
Date:

Division Chief's  
Approval  
Signature:  
Date:

Effective date of license:  
  
License No.