

## APPLICATION FOR SECONDHAND DEALERS PERMIT (NEW) <u>APPLICATION MUST BE SUBMITTED IN PERSON</u> (858) 720-2403 for Appointment

PLEASE PRINT Name \_\_\_ (Last) (First) (Middle) All Other Names Used \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex: Male Female Place of Birth \_\_\_\_\_ Height\_\_\_\_\_ Weight\_\_\_\_ Hair \_\_\_\_ Eyes \_\_\_\_\_ Driver's License No. State Soc. Sec. No Residence Address \_\_\_\_\_ Home Phone Work Phone LIST BELOW ALL CHARGES RESULTING IN CONVICTION OR PLEA OF NOLO CONTENDERE: Date Charge Investigating Agency Disposition \_\_\_\_\_ Phone \_\_\_\_\_ Business Name Business Address Are you the sole owner of the business? Yes 
No 
If no, have all partners or business associates complete the miscellaneous identification sheet. (If additional sheets are needed, copy the one attached). Type of articles to be bought or sold: Do you intend to handle concealable firearms? Yes 
No State sales permit # Will you be buying or selling tangible personal property as defined in Section 21627 of the California Business & Professions Code (see below)? Yes L No L

All tangible personal property, new or used, received in pledge as security for a loan by a pawnbroker or secondhand dealer.

All property bearing a serial number, personalized initials, or inscription at the time it is acquired by a pawnbroker or secondhand dealer.

All personal property commonly sold by secondhand dealers which is determined by the Attorney General to be frequently stolen including jewelry and sterling silver utensils.

## APPLICATION FOR SECONDHAND DEALER PERMIT (Continued)

If answer is yes to any of the three categories described, you will be required to obtain a license from the State.

I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION I HAVE GIVEN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND AND AGREE TO HAVING ALL REQUIRED NOTICES, UNLESS OTHERWISE SPECIFIED, SENT BY U.S. MAIL TO THE ADDRESS GIVEN ON THIS APPLICATION. I HAVE READ AND UNDERSTAND THE SECTIONS OF THE SOLANA BEACH MUNICIPAL CODE PERTAINING TO SECONDHAND DEALERS.

\*\*Certain information provided in this application may be disclosed pursuant to valid requests for public information.

Signature of Applicant	Date

## YOU ARE REQUIRED TO SUBMIT THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION: (INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED)

- 1) Photo Identification (driver's license or state-issued identification card only)
- 2) Fee **FEES ARE NONREFUNDABLE**
- 3) Miscellaneous identification sheet and photographs for each additional owner or partner.
- 4) Legal description of the property where the activity will occur.
- 5) A document showing that the applicant is the owner of the premises, or an agreement in writing by the owner permitting such use of the premises.
- 6) Fictitious Name Registration. If a corporation, a copy of the corporate papers issued by the State of California.
- 7) Business Registration Certificate or a completed application and appropriate fee.
- 8) State of California Secondhand Dealers License or completed application and appropriate fee.

	ENCIES** IF APPI DEPARTMENT IN CASE O			DAY LIMIT APPLICANT WILL BE
SHERIFF'S DEPARTMENT		CODE COMPLIANCE/FIRE DEPARTMENT		
Approved			• •	Disapproved $\square$
				Date
PLANNING DEPARTMENT				
Approved $\Box$	Disapproved $\Box$			
Reason				
By:	Date:	<del></del>		
Accepted by			Date	

## MISCELLANEOUS IDENTIFICATION SHEET PLEASE PRINT Name (Middle) (First) All Other Names Used Date of Birth \_\_\_\_\_ Sex: Male Place of Birth \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_ Hair \_\_\_ Eyes \_\_\_\_ Driver's License No. State \_\_\_\_\_ Soc. Sec. No \_\_\_\_\_ Residence Address \_\_\_\_\_ How Long At Address? Home Phone Work Phone Past Two Residence Addresses OCCUPATIONS FOR LAST THREE (3) YEARS Business Name & Address Position Dates Employed LIST BELOW ALL CHARGES RESULTING IN CONVICTION OR PLEA OF NOLO CONTENDERE: Investigating Date Released or Date Disposition Placed on Probation Charge Agency I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION I HAVE GIVEN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND AND AGREE TO HAVING ALL REQUIRED NOTICES, UNLESS OTHERWISE SPECIFIED, SENT BY U.S. MAIL TO THE ADDRESS GIVEN ON THIS APPLICATION. I HAVE READ AND UNDERSTAND THE SECTIONS OF THE SOLANA BEACH MUNICIPAL CODE PERTAINING TO THE SUBJECT BUSINESS. \*\*Certain information provided in this application may be disclosed pursuant to valid requests for public information Signature of Applicant:\_\_\_\_\_\_Date\_\_\_\_\_

- 1) Valid photo identification must be provided.
- 2) Photographs and/or fingerprint cards may be required.