



City of Santa Fe Springs Department of Police Services

11576 Telegraph Road • Santa Fe Springs, CA 90670 • (562) 409-1850 •
Fax (562) 409-1854

Application for Regulatory Business Permit

Check One: Corporation Partnership Sole Proprietor

1. Applicant's Name: _____
Doing Business As: _____
Business Address: _____ Phone: _____
Mailing Address: _____
Residence Address: _____ Phone: _____

Age Sex Ht. Wt. Eyes Hair Date of Birth Place of Birth Drivers Lic.#

Have you ever been convicted of a criminal charge other than a minor traffic violation? Yes No
If yes, complete the following:

Court _____ Date _____
Charge _____ Disposition _____

2. Give Name and Address of owner or owners of premises:

3. Describe the type or nature of the business:

4. Give the name of person exercising authority or control of location and authorized to accept legal notice of process: _____

5. Do you presently or have you in the past owned or operated a business at other locations for which a Conditional Use Permit or Business Regulatory permit was required? Yes No

(Continued on back)

If yes, complete the following for each business.

<u>BUSINESS NAME</u>	<u>ADDRESS</u>	<u>DATES OF OPERATION</u>	<u>TYPE OF PERMIT</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6. Do you have only applications for doing business which are under review for granting, reviewing, suspending or revoking before any regulatory agency? Yes No

If yes, explain giving type of action and name of regulatory agency:

7. Have you ever had a license denied or revoked? Yes No

If yes, explain: _____

8. Will minors be permitted on premises? Yes No

9. Will a vehicle be used in course of business? Yes No

If yes, state make, model and state license#: _____

10. Are other Federal, State, or County License required to operate the proposed business? Yes No

If yes, state type and license #: _____

11. Do you presently employ or intend to employ a security service? Yes No

If yes, give name and telephone number: _____

I solemnly swear that the information contained herein is true and correct to the best of my knowledge and belief. I agree that there shall be full compliance with all state and city laws in the conduct of the activities for which the permit is granted.

Applicant's Signature

Date