



CITY OF LOS ALAMITOS

APPLICATION FOR PAWNBROKER AND SECONDHAND DEALER PERMIT

Development Services Department
3191 Katella Ave., Los Alamitos, CA 90720-5600
Phone: (562) 431-3538 Fax: (562) 493-0678

FOR OFFICE USE ONLY

Non Fundable Filing Fee: \$374.00

Application #: _____

Received: _____

POLICE REVIEW: APPROVED DENIED

C.D. REVIEW: APPROVED DENIED

Note: A Conditional Use Permit Application is required to be submitted with this application

BUSINESS INFORMATION

Business Address: _____

Business Name: _____

Describe the exact nature of the product or service that is proposed to be solicited: _____

APPLICANT INFORMATION

Applicant's Legal Name: _____

Alias or Maiden Name: _____

Phone Number: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Sex: _____ Age: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

Social Security Number: _____ Driver's License Number: _____ State: _____

If the applicant is a corporation:

Name of the corporation exactly as shown in its articles of incorporation: _____

Attach a list of the names, residence address of each of the officers, directors and each stockholder holding more than five percent of the stock of the corporation, along with the amount of stock held.

If the applicant is a partnership:

Name of Partner: _____

Residence Address: _____

City: _____ State: _____ Zip: _____

Social Security Number: _____ Driver's License Number: _____ State: _____

(If one or more of the partners is a corporation, the provisions pertaining to a corporate applicant above shall apply)

PREVIOUS RESIDENCES FOR THE LAST 5 YEARS

1. Address: _____

City: _____ State: _____ Zip: _____

Dates of Residence: _____

2. Address: _____

City: _____ State: _____ Zip: _____

Dates of Residence: _____

BUSINESS, OCCUPATION, OR EMPLOYMENT HISTORY FOR THE LAST 5 YEARS

1. Business Name: _____ Business Type: _____

Dates of Employment: _____ Position Held: _____

Address: _____

City: _____ State: _____ Zip: _____

2. Business Name: _____ Business Type: _____
 Dates of Employment: _____ Position Held: _____
 Address: _____
 City: _____ State: _____ Zip: _____
3. Business Name: _____ Business Type: _____
 Dates of Employment: _____ Position Held: _____
 Address: _____
 City: _____ State: _____ Zip: _____

LIST ALL CRIMINAL CONVICTIONS OR OFFENSES LISTED IN SECTION 5.36.030

1. Offense: _____ Date: _____
 City: _____ State: _____ Disposition: _____
2. Offense: _____ Date: _____
 City: _____ State: _____ Disposition: _____

Yes No Are you required to register under the California Penal Code Section 290?
 Yes No Have you, the applicant (including a corporation or partnership), or a building in which you were employed or conducted a business, ever been subjected to an abatement proceeding under California Penal Code Section 11225-11235 or any similar provisions of law in a jurisdiction outside the state of California?

PERSONAL REFERENCES

1. Name: _____ Relationship to Applicant: _____
 Phone Number: _____
 Address: _____
 City: _____ State: _____ Zip: _____
2. Name: _____ Relationship to Applicant: _____
 Phone Number: _____
 Address: _____
 City: _____ State: _____ Zip: _____
3. Name: _____ Relationship to Applicant: _____
 Phone Number: _____
 Address: _____
 City: _____ State: _____ Zip: _____

The following information is also required to be submitted:

- Fingerprints for purposes of establishing identification, or in lieu of, at least three (3) letters of recommendation from reliable property owners in the county of Orange, certifying as to the applicant's good character and business responsibility, or other evidence which establishes, to the satisfaction of the Chief of Police, the good character and business responsibility of such person or persons.
 - A government issued ID or passport that establishes that the application is at least eighteen
 - Two (2) prints of a recent passport-size photograph of the applicant.

CERTIFICATION OF APPLICANT: I certify under penalty of perjury that the information provided on this document is true and correct. In addition, I authorize the City of Los Alamitos, its employees and agents to seek information and conduct an investigation into the truth of the statements set forth in this application and my qualifications for the license. Should this application meet the requirements as set forth in the Los Alamitos Municipal Code Chapter 5.36 and be approved by the City Council, I also certify that I understand that any Pawnbroker and Secondhand Dealer Permit that is issued must be renewed annually at the fee listed in the City's adopted fee schedule.

Applicant's Signature: _____ **Date:** _____