



SAN DIEGO POLICE DEPARTMENT - PERMITS AND LICENSING



**CARD ROOM EMPLOYEE INFO SHEET**

San Diego Municipal Code, Section 33.0101(c), states you must have a valid police permit to engage in a business or occupation designated as police regulated. You are responsible for being familiar with and complying with the rules and regulations related to Card Rooms. Copies of the Card Room Ordinance and General Divisions for police regulated activities may be obtained from the City Clerk’s office located at 202 C Street, 2nd Floor, Telephone # (619) 533-4000 or via the City’s website: <http://www.sandiego.gov> (Department, City Clerk, Documents, Municipal Code), [SDMC Chapter 3, Article 3, Divisions 1-5, and 39](#).

**ALL NEW APPLICATIONS MUST BE SUBMITTED IN PERSON TO THE OFFICE OF THE CITY TREASURER located at 1200 Third Avenue, Suite 100, San Diego, CA 92101. For questions, contact the Business Tax Program at (619) 615-1500.**

Note: Regulation and enforcement will continue to be performed by SDPD.

**YOU MUST PROVIDE ALL OF THE FOLLOWING WHEN APPLYING FOR THE ABOVE MENTIONED POLICE PERMIT**

**INCOMPLETE APPLICATION PACKETS WILL NOT BE ACCEPTED**

- [POLICE PERMIT APPLICATION](#) - Fill out the application completely. A thirty (30) day investigation period begins at the time the application is submitted. A criminal records check will be made on each applicant.
- [LIVE SCAN FINGERPRINTS](#) - **Required** for all new applicants. The San Diego Municipal Code states Fingerprints must be taken by a Governmental Agency. Fill out the attached “Request for Live Scan Service” form and bring it with you to a Live Scan agency. See attached list of locations. Return your completed application to the Office of the City Treasurer so your application can be processed. **The completed "Request for Live Scan Service" form is valid for only thirty (30) days from the date your fingerprints were taken. After thirty (30) days you will be required to re-do your Live Scan fingerprints.**
- [STATEMENT OF UNDERSTANDING](#) – Read, initial each line, sign and date.
- [IDENTIFICATION](#) - A current U.S. government issued photo identification card (i.e. Driver’s License or Military I.D., U.S. Passport) is required.
- [FEES](#) – Cash, checks, and credit cards are accepted. Please make checks, money orders, and cashier’s checks payable to the **City Treasurer**.

In addition to the annual PD Regulatory fee, all permits are assessed a non-refundable \*Application Fee. The application fee consists of a \$20 investigative fee (background review) for one Owner/Officer and a \$54 application fee for new permits (\$50 at time of renewal).

[PHOTOGRAPHS](#) – Photo ID will be taken at the time of application at the Office of the City Treasurer.

The \*\*Photo ID Fee (\$15.00) is non-refundable.

**\$51.00** - Regulatory Permit Fee / Card Room Employee  
**\$74.00** - \*Application Fee  
**\$16.00** - \*\*Photo ID Fee  
**\$141.00** - Total

# POLICE PERMIT APPLICATION – OWNER/OFFICER ADDENDUM



SUBMIT FORM IN PERSON AT:  
 OFFICE OF THE CITY TREASURER  
 1200 THIRD AVE SUITE 100, SAN DIEGO, CA 92101  
 (619) 615-1500



**PLEASE COMPLETE ALL SECTIONS IF APPLICABLE**  
 (TYPE OR PRINT LEGIBLY)

PERMIT TYPE: \_\_\_\_\_ BUSINESS TAX CERTIFICATE#: \_\_\_\_\_

Applicant Title:  Partner  Corporate Officer  Other: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Driver's License/ID #: \_\_\_\_\_ State: \_\_\_\_\_

Residence Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Residence Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Business Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

*Business Where Applicant Expects to be Employed*

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

**1. List similar permits or licenses issued by any agency or board, or any city, county, state or federal agency in the past five (5) years.**

**IF NONE INITIAL HERE:** \_\_\_\_\_

TYPES OF LICENSE	LICENSE NUMBER	DATES HELD	CITY AND STATE
1.		FROM      TO	
2.		FROM      TO	
3.		FROM      TO	

**FOR OFFICE USE ONLY**

Application Date: \_\_\_\_\_ Corresponding Permit #: \_\_\_\_\_ Received by: \_\_\_\_\_ Live Scan Rec: \_\_\_\_\_

Records Check: \_\_\_\_\_ RI01 OK or: \_\_\_\_\_

Approving Officer: \_\_\_\_\_ Date: \_\_\_\_\_

2. Have you ever had any permit or license issued by any agency or board, or any city, county, state or federal agency denied, suspended or revoked?  Yes  No

If yes, please complete below:

CITY/STATE	DATE OF SUSPENSION OR REVOCATION	REASON
1.		
2.		
3.		

3. List all criminal convictions, including convictions in another state and those under appeal. Include pleading of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of *nolo contendere* or no contest. Expunged convictions must be listed per California Penal Code section 1203.4(a). Infractions are excluded.

**IF NONE, INITIAL HERE:** \_\_\_\_\_

CHARGE	DATE CONVICTED	LOCATION OF COURT
1.		
2.		
3.		
4.		

\*For additional info in any section, please use separate sheet(s).

**APPLICANTS:** It is the responsibility of the permit holder to renew the permit no later than fifteen (15) calendar days after the expiration date on the permit. Failure to renew on time will result in a penalty fee of \$25.00 plus 10% of the regulatory fee. If a renewal is not completed with all fees and penalties paid within the following calendar month after the due date, the permit expires and business operations, occupations, or activities allowed by the permit must cease. Any outstanding balance (PD or Business Tax fees) may be referred to our Delinquent Accounts Program.

**INITIAL HERE:** \_\_\_\_\_

A police permit is required for any person or entity engaged in any occupation or business deemed to be police-regulated, as set forth in Chapter 3, Article 3 of the San Diego Municipal Code, <http://www.sandiego.gov/city-clerk/officialdocs/legisdocs/muni.shtml>. Under penalty of perjury, applicant understands and agrees: To abide by all federal, state, and local laws; Consent to inspection by the Chief of Police per SDMC § 33.0103; The investigation fee is non-refundable per SDMC § 33.0307; Applications must be complete and truthful; Applicant will not willfully make a false statement or fail to report any material fact in the application per SDMC § 11.0401(b); Any changed circumstance which would have been grounds for denial of the application is grounds for denying a renewal application; Failure to disclose any material circumstance, whether or not such circumstance would have been grounds for denial, is grounds for denying a renewal permit.

**INITIAL HERE:** \_\_\_\_\_

To review grounds for denial, please refer to Municipal Code section 33.0305. Municipal Code or specific industry code sections may be accessed at the web address referenced above.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE OF APPLICATION

**PLEASE BE ADVISED THE INFORMATION YOU PROVIDE ON YOUR APPLICATION MAY BE SUBJECT TO PUBLIC DISCLOSURE PER THE CALIFORNIA PUBLIC RECORDS ACT**



**REQUEST FOR LIVE SCAN SERVICE**

BCII 8016 (3/07)

**Applicant Submission**

ORI: CA0371100 Type of Application: Permits and Licensing  
Code assigned by DOJ

Job Title or Type of License, Certification or Permit: \_\_\_\_\_

Agency Address Set Contributing Agency:

San Diego Police Department 08228  
Agency authorized to receive criminal history information Mail Code (five-digit code assigned by DOJ)

P.O. Box 121431- MS 735 \_\_\_\_\_  
Street No. Street or PO Box Contact Name (Mandatory for all school submissions)

San Diego California 92112-1431 ( 619 ) 531-2250  
City State Zip Code Contact Telephone No.

Name of Applicant: \_\_\_\_\_  
(Please print) Last First MI

Alias: \_\_\_\_\_ Driver's License No: \_\_\_\_\_  
Last First

Date of Birth: \_\_\_\_\_ Sex:  Male  Female Misc. No. BIL - APPLICANT TO PAY  
Agency Billing Number

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Misc. Number: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Home Address: \_\_\_\_\_  
Street No. Street or PO Box

Place of Birth: \_\_\_\_\_  
City, State and Zip Code

Social Security Number: \_\_\_\_\_

Your Number: \_\_\_\_\_  
OCA No. (Agency Identifying No.)

Level of Service:  DOJ  FBI

If resubmission, list Original ATI Number: \_\_\_\_\_

Employer: (Additional response for agencies specified by statute)

Not Applicable  
Employer Name

Street No. \_\_\_\_\_ Street or PO Box \_\_\_\_\_ Mail Code (five digit code assigned by DOJ) \_\_\_\_\_  
City State Zip Code ( ) Agency Telephone No. (optional)

Live Scan Transaction Completed By: \_\_\_\_\_  
Name of Operator Date

Transmitting Agency \_\_\_\_\_ ATI No. \_\_\_\_\_ Amount Collected/Billed \_\_\_\_\_

# **Live Scan Fingerprint Information**

## **Municipal Code §33.0304 - Applicant and Employees to Furnish Fingerprints and Photographs**

For the purpose of investigation and for regulation of the occupation or business during the time it is licensed, applicants, *responsible persons*, managers, or *employees* may be required to furnish their fingerprints and photographs. ***Fingerprints must be taken by a governmental agency.*** The *Chief of Police* shall forward the fingerprints to the Identification Division of the State of California, Department of Justice, or the Federal Bureau of Investigation, for identity confirmation and criminal histories.

### **The following are acceptable US Governmental Agencies located in San Diego County:**

#### **CHULA VISTA**

Chula Vista Police Department  
315 Fourth Avenue  
Chula Vista, CA 91911  
Contact: (619) 409-5954  
M - F, 8am-12pm, **Appointments Only**  
M - F, 1pm-4pm, **Appointments Only**  
[www.chulavistapd.org](http://www.chulavistapd.org)

#### **LA MESA**

La Mesa Police Department  
8085 University Avenue  
La Mesa, CA 91942  
Contact: (619) 667-7592  
M - F, 9am - 430pm  
**Appointments/Walk-In**  
**\*Hours may vary. Call to confirm.**

#### **SAN DIEGO** – LSID X54/ML1

San Diego Community College Police  
1536 Frazee Road, 1<sup>st</sup> Floor  
San Diego, CA 92108  
Contact: (619) 388-6416  
M - F, 8am-4pm, **Appointments Only**