



SAN DIEGO POLICE DEPARTMENT - PERMITS AND LICENSING



FIREARMS DEALER RENEWAL INFORMATION SHEET

San Diego Municipal Code, section 33.0101(c) states you must have a valid police permit to operate a business designated as police regulated. You are responsible for being familiar with and complying with the rules and regulations related to the regulation of Firearms Dealers. Copies of the Firearms Dealers Ordinance and General Divisions Ordinances 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 42.](#)

Renewal applications may be submitted in person at the Office of the City Treasurer located at: [1200 Third Avenue, Suite 100, San Diego, CA 92101](#)

Mailing Address: [SDPD Permits, P.O. Box 122289, San Diego, CA 92112-2289](#)

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 A FIREARMS POLICE PERMIT **INCOMPLETE & REPLICATED APPLICATION PACKETS WILL NOT BE ACCEPTED**

- **Completed Applications:** Firearms Dealer Renewal Application & Business Addendum Application (per owner/officer if applicable).
- **Complete Employee Supplemental(s)** - Print and add additional supplemental forms as needed.
- Copy of valid State Certificate of Eligibility (COE) or a copy of your State Certificate of Eligibility Request form. You may download a Certificate of Eligibility application at: [COE Application Form](#). For questions regarding the COE, you may reach the State at 1(800) 952-5225.
- Copies of **current** State Certificate of Eligibility (COE) for all current employees, 1-800-952-5225. Renewal applications will be rejected if current COEs are not provided for ALL employees who handle/sell firearms.
- Copy of valid Seller's Permit from the State Board of Equalization, (858) 358-4700.
- Copy of a **valid** Federal Firearms License, <https://www.atf.gov/firearms/instructions-form-7-application-federal-firearms-license>
- Copies of any special permits issued by the Department of Justice, 1-800-952-5225.
- Copy of valid State Secondhand Dealers/Pawnbroker License if business is involved in the purchase and sale of used Firearms. Please refer to the SDPD Second Hand Dealer (Tangible) packet for additional information and application forms. https://www.sandiego.gov/sites/default/files/legacy/treasurer/pdf/new_second_hand_tangible.pdf
- Identification in the form of a valid government issued photo identification card (i.e. driver's license or military ID) for all owners and employees.
- California DOJ Centralized List
- Fees - Cash, checks, and credit cards are accepted. Please make checks, money orders, and cashier's checks payable to the **City Treasurer**.
 - \$2,039.00** - Regulatory Permit Fee / Firearms Dealer
 - \$50.00** - Application Fee
 - \$2,089.00** - Total

NOTE: In accordance with 26915 of the California Penal Code, each employee who handles, sells, or delivers firearms is required to have a Certificate of Eligibility (COE) issued by the California Department of Justice.

RENEWAL FIREARMS DEALER LICENSE APPLICATION

Business Name:

Police Permit #

Staff /Processed by:

Date Processed:

Application Date:

APPLICANT'S BUSINESS IS:

INDIVIDUALLY OWNED

CORPORATION

PARTNERSHIP

OTHER

(Specify) _____

BUSINESS STREET ADDRESS

MAILING ADDRESS (If different)

CITY

STATE

ZIP

BUSINESS PHONE

HOME PHONE

E-MAIL ADDRESS

BUSINESS HOURS

SUN

MON

TUE

WED

THUR

FRI

SAT

OPENING HOUR

CLOSING HOUR

EACH OWNER, CORPORATE OFFICER OR PARTNER IS DEEMED AN APPLICANT AND EACH MUST PROVIDE THE FOLLOWING INFORMATION. AN APPLICANT WHO IS A CORPORATION OR PARTNERSHIP SHALL DESIGNATE ONE OF ITS OFFICERS OR GENERAL PARTNERS TO ACT AS ITS RESPONSIBLE MANAGING OFFICER. THE RESPONSIBLE MANAGING OFFICER MAY COMPLETE AND SIGN ALL APPLICATIONS ON BEHALF OF THE CORPORATE OFFICERS OR PARTNERS. OWNER CO-OWNER TITLE _____

COMPANY PRINCIPALS RESPONSIBLE FOR BUSINESS TRANSACTIONS

NAME	(LAST)	(FIRST)	(MI)	HOME ADDRESS	CITY	ZIP	HOME PHONE	D.O.B.
NAME	(LAST)	(FIRST)	(MI)	HOME ADDRESS	CITY	ZIP	HOME PHONE	D.O.B.
NAME	(LAST)	(FIRST)	(MI)	HOME ADDRESS	CITY	ZIP	HOME PHONE	D.O.B.

APPLICANT'S NAME	(LAST)	(FIRST)	(MIDDLE)	DATE OF BIRTH			
RESIDENCE ADDRESS	CITY	ZIP	E-MAIL				
RESIDENCE PHONE	BUSINESS PHONE	SOCIAL SECURITY NUMBER	CERTIFICATE OF ELEGIBILITY #				
MARITAL STATUS	ALIAS/MAIDEN NAME	SPOUSE'S NAME					
DRIVER'S LICENSE NUMBER	STATE	RACE	SEX	WEIGHT(lbs)	HEIGHT	HAIR	EYES
US. CITYZEN?	NATURALIZED?	IMMIGRATION/VISA #	DATE EXPIRED				
YES NO	YES NO						

List all criminal convictions, except traffic convictions. Include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of nolo contendere. Expunged convictions must be listed per California Penal Code Section 1203.4 (a).

If none, initial here: _____

CHARGE	DATE CONVICTED	LOCATION OF COURT

THIS FORM IS FOR INTERNAL USE ONLY.

PRIVATE AND CONFIDENTIAL

FIREARMS DEALER LICENSE APPLICATION SUPPLEMENTAL

(print additional forms as needed)

☐ **EMPLOYEE
SUPPLEMENTAL**
DATE

COMPANY EMPLOYEES

NAME (LAST) (FIRST) (MIDDLE)	SSN	HEIGHT	WEIGHT
RESIDENCE ADDRESS	DRIVERS LICENSE NUMBER STATE	HAIR	EYES
HOME PHONE	DATE OF BIRTH MO DY YR	U.S. CITIZEN [] YES [] NO	VISA # EXPIRATION
OTHER NAMES USED (Alias-Maiden):	COE #: Exp Date:	BIRTHPLACE	

List all criminal convictions, except traffic convictions. Include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of nolo contendere. Expunged convictions must be listed per California Penal Code Section 1203.4 (a).

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If none, initial here: _____

CHARGE	DATE CONVICTED	LOCATION OF COURT

Fingerprint records on all new employees?

YES ☐

NO ☐

Current list of employees submitted?

YES ☐

NO ☐

SUPPLEMENTAL CONT'D				COMPANY EMPLOYEES													
NAME (LAST) (FIRST) (MIDDLE)			SSN #		HEIGHT		WEIGHT										
RESIDENCE ADDRESS			DRIVERS LICENSE NUMBER		HAIR		EYE S										
			STATE														
HOME PHONE			DATE OF BIRTH MO DY YR		U.S. CITIZEN [] YES [] NO												
OTHER NAMES USED (Alias-Maiden):			COE #: Exp Date:		VISA # EXPIRATION												
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<p>APPLICANTS: THE RIGHT OF REASONABLE INSPECTION SHALL BE A CONDITION FOR ISSUANCE OF A POLICE PERMIT. IF A PERMIT IS ISSUED, REPRESENTATIVES OF THE POLICE DEPARTMENT WILL HAVE ACCESS TO THE BUSINESS PREMISES DURING BUSINESS HOURS WHICH MAY INCLUDE ENTRY INTO THE NON-PUBLIC PORTION OF THE PREMISES.</p> <p>I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS MADE ON THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT ANY FALSE STATEMENTS OR INFORMATION ARE GROUNDS FOR DENIAL OF THIS APPLICATION AND THAT I AM SUBJECT TO PROSECUTION PER 11.0401(B) OF THE SAN DIEGO MUNICIPAL CODE. I AM AWARE THAT ALL FEES ARE NON-REFUNDABLE.</p> <p>IT IS THE RESPONSIBILITY OF THE PERMIT HOLDER TO RENEW THE PERMIT NO LATER THAN 10 DAYS AFTER THE EXPIRATION DATE. FAILURE TO RENEW ON TIME WILL RESULT IN PENALTY FEES (\$25 PLUS 10% OF THE REGULATORY FEE). IF A RENEWAL IS NOT COMPLETED WITH ALL FEES AND PENALTIES PAID WITHIN 30 DAYS AFTER THE PERMIT EXPIRATION DATE, THE PERMIT EXPIRES AND ACTIVITIES ALLOWED BY THE PERMIT MUST CEASE. A PERMITEE MUST THEN BEGIN THE APPLICATION PROCESS AS A NEW APPLICANT (SDMC 33.0308).</p> <p>I AM AWARE THAT THE APPLICATION FEE IS NON-REFUNDABLE. I AM AWARE THAT I AM RESPONSIBLE FOR BEING FAMILIAR WITH AND COMPLYING WITH THE RULES AND REGULATIONS RELATED TO THE POLICE REGULATED BUSINESS OR OCCUPATION FOR WHICH I AM APPLYING. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM OBTAINING PERMITS OR APPROVALS REQUIRED BY THE CITY OF SAN DIEGO OR STATE OR FEDERAL LAW. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM COMPLYING WITH ALL APPLICABLE LOCAL, STATE, AND FEDERAL LAWS, INCLUDING THOSE RELATED TO BUILDING, ZONING, AND FIRE, AND OTHER PUBLIC SAFETY REGULATIONS. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT VEST ANY DEVELOPMENT RIGHTS IN THE PROPERTY OR BUSINESS. I AM AWARE THAT I AM RESPONSIBLE FOR SUBMITTING A SUPPLEMENTAL APPLICATION AND FINGERPRINT CARDS IMMEDIATELY UPON HIRING NEW EMPLOYEES.</p>																	
<div style="border-bottom: 1px solid black; width: 100%;"></div> Applicant's Signature			<div style="border-bottom: 1px solid black; width: 100%;"></div> Date		<div style="border-bottom: 1px solid black; width: 100%;"></div> APPROVED DENIED		<div style="border-bottom: 1px solid black; width: 100%;"></div> Reviewing Officer										
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<p>Fingerprint information submitted on all new and or/rehired employees? [] Yes [] No</p>																	
<p>Firearm Dealer Employee applications submitted for all employees? [] Yes [] No</p>																	