

### 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 <u>Firearms Dealers</u> Ordinance and General Divisions Ordinances for police regulated activities maybe obtained from the CityClerk's office located at 202 C Street, 2nd Floor, Telephone # (619) 533-4000 or via the City's website: https://www.sandiego.gov/city-clerk/officialdocs/municipal-code

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).
- 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: <u>COE Application Form</u>. 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, <u>https://www.atf.gov/firearms/instructions-form-7-application-federal-firearms-license</u>
- 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.<u>https://www.sandiego.gov/sites/default/files/legacy/treasurer/pdf/new\_second\_hand\_tangible.pdf</u>
- 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**.

**\$2,567.00 -** Regulatory Permit Fee / Firearms Dealer **<u>\$83.00 - Application F</u>ee (Investigative fee \$24 and \$59 Admin fee \$2,650.00 - 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.

## ONLY ORIGINAL PD APPLICATION WILL BE ACCEPTED

# FIREARMS DEALER LICENSE APPLICATION (RENEWAL)

Business Name:					Police Permit	:#	
New Application: Renewal:							
DATE:							
APPLICANT'S BUSINES	5 IS:						
INDIVIDUALLY OWNED	C	ORPORATION	PARTNE		THER (Specif	fy)	
BUSINESS STREEET ADDRI	ESS		MAILIN	G ADDRESS (If diffe	rent)		
СІТУ				STATE		ZIP	
BUSINESS PHONE	PHONE HOME PHONE		2	E-MAIL ADDRESS			
	SUN	MON	TUE	WED	THUR	FRI	SAT
BUSINESS HOURS							
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							
COMPA	NY PRI	NCIPALS R	RESPONSIE	BLE FOR BUS	SINESS TRAN	NSACTIO	NS
NAME (LAST) (FI	RST)	(MI) HOM	E ADDRESS	CITY	ZIP	HOME PHO	ONE 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						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
YES NO	TURALIZE YES	NO	IMIGRATION/VIS/		DATE EXPIREI		
List all criminal convictions, ex	-				-		
an original charge, and pleadi	ngs of nol	o contendere. Ex	xpunged convict	tions must be listed	l per California Pe	nal Code Sec	etion 1203.4 (a).
If none, initial here:							
CHARG	Е		DATE CO	NVICTED	LO	CATION OF O	COURT
THIS FORM IS FOR INTERNAL USE ONLY. PRIVATE AND CONFIDENTIAL							

## ONLY ORIGINAL PD APPLICATION WILL BE ACCEPTED

# FIREARMS DEALER LICENSE APPLICATION

	S	SUPPLE	CMENTAL				
□ EMPLOYEE							
SUPPLEMENTAL							
DATE							
	CO	MPANY	<b>EMPLOYE</b>	ES			
NAME (LAST) (FIRST) (M IDDLE)			SSN	HEIGHT	WEIGHT		
RESIDENCE ADDRESS	DRI	VERS LICENSE N	UMBER	HAIR	EYES		
STATE							
HOME PHONE OTHER NAMES USED (Alias-Maiden):	TE OF BIRTH	MO DY YR	U.S. CITIZEN [] Y. VISA # EXPI	ES [] NO RATION			
OTHER NAMES USED (Allas-Maluell).	COE	E #: Exp Date:		BIRTHPLACE			
List all criminal convictions, except traffic convictions.			1				
an original charge, and pleadings of nolo contendere. E							
If none, initial here:	·*••••	geu constantes :	must be lister Fill 1.		u).		
CHARGE		DATE (	CONVICTED	LOCATION OF COURT			
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RESIDENCE ADDRESS		VERS LICENSE N	UMBER	HAIR	EYES		
HOME PHONE	STA' DAT	ATE FE OF BIRTH MO DY YR		U.S. CITIZEN	ES [] NO		
OTHER NAMES USED (Alias-Maiden):	-	L 01 2			RATION		
	COL	E #: Exp Date:		BIRTHPLACE			
List all criminal convictions, except traffic convictions.	Inclu	de pleadings of	guilty to a lesser charg	ge in satisfaction of, or as a substitu	te for,		
an original charge, and pleadings of nolo contendere. E	Expun	ged convictions	must be listed per Cali	ifornia Penal Code Section 1203.4 (	a).		
If none, initial here:					COUDE		
CHARGE		DATE	CONVICTED	LOCATION OF	COURT		
NAME (LAST) (FIRST) (M IDDLE)		<u>i</u>	SSN #	HEIGHT	WEIGHT		
RESIDENCE ADDRESS	RESIDENCE ADDRESS DRIVERS LICE STATE		UMBER	HAIR	EYES		
HOME PHONE		TE OF BIRTH	MO DY YR	U.S. CITIZEN [] YES [] NO			
OTHER NAMES USED (Alias-Maiden):				VISA # EXPIRATION			
	COL	E #:	Exp Date:	BIRTHPLACE			
List all criminal convictions, except traffic convictions.	Inclu	de pleadings of	guilty to a lesser charg	e in satisfaction of, or as a substitu	te for,		
an original charge, and pleadings of nolo contendere. E	xpun	ged convictions	must be listed per Cali	ifornia Penal Code Section 1203.4 (	a).		
If none, initial here: CHARGE	,	DATE (	CONVICTED	LOCATION OF	COURT		
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	COI		Exp Date:				
List all criminal convictions, except traffic convictions.							
an original charge, and pleadings of nolo contendere. E	xpun	ged convictions	must be listed per Cali	ifornia Penal Code Section 1203.4 (	a).		
If none, initial here: CHARGE	<del></del> 1	DATE (	CONVICTED	LOCATION OF COURT			
		·					
Fingerprint records on all new employees?							
Current list of employees submitted?				YES N	о 🗆		

## ONLY ORIGINAL APPLICATION WILL BE ACCEPTED

SUPPLEMENTAL CONT'D COMPANY EMPLOYEES							
NAME (LAST) (FIRST) (MIDE	OLE)	SSN #	HEIGHT	WEIGHT			
RESIDENCE ADDRESS	DRIVERS LICENSE	NUMBER	HAIR	EYE S			
	STATE						
HOME PHONE	DATE OF BIRTH	MO DY YR		YES [] NO			
OTHER NAMES USED (Alias-Maiden):			VISA # E2	<b>XPIRATION</b>			
	COE #:	Exp Date:					
List all criminal convictions, except traffic convict	ions, include plead	ings of guilty to a less	er charge in satisfaction of, or	as a substitute for,			
an orginal charge, and pleadings of nolo contendere. Expunged convictions must be listed per California Penal Code Section 12034(a)							
If none, initial here:							
CHARGE	DATE	CONVICTED	LOCATION OF	LOCATION OF COURT			
NAME (LAST) (FIRST) (MID	DLE)	SSN #	HEIGHT	WEIGHT			
RESIDENCE ADDRESS	DRIVERS LICENSE	NUMBER	HAIR	EYES			
	STATE						
WOME PHONE							
HOME PHONE	DATE OF BIRTH	MO DY YR		JYES [] NO			
OTHER NAMES USED (Alias-Maiden):			VISA # E	<b>XPIRATION</b>			
	COE #:	Exp Date:					
List all criminal convictions, except traffic convictions, include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for,							
an orginal charge, and pleadings of nolo contendere. Expunged convictions must be listed per California Penal Code Section 12034(a)							
If none, initial here:							
CHARGE	DATE	CONVICTED	LOCATION OF	LOCATION OF COURT			
	DATE						

**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.

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.

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).

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.

Applicant's Signature	Date	DENIED	Reviewing Officer	Date			
Fingerprint information submitted on all new and or/rehired employees? [ ] Yes [ ] No							
Firearm Dealer Employee application	is submitted for all e	mployees? [ ]	Yes [ ] No				