

\_\_\_\_ New Permit  
\_\_\_\_ Renewal  
\_\_\_\_ Amend

CITY OF NEWPORT BEACH  
LICENSE DIVISION  
3300 NEWPORT BLVD  
P.O. BOX 1768  
NEWPORT BEACH, CA 92659-1768

PERMIT #:

- Live Entertainment \$ \_\_\_\_\_
- Patron Dance \$ \_\_\_\_\_
- Tow Truck Driver \$ \_\_\_\_\_
- Taxi Driver \$ \_\_\_\_\_
- Escort Service \$ \_\_\_\_\_
- Escort Employee \$ \_\_\_\_\_
- Skill Games Operator \$ \_\_\_\_\_
- Door To Door Solicitor \$ \_\_\_\_\_
- Pawn Broker/2nd Hand \$ \_\_\_\_\_

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APPLICANT INFORMATION

Name \_\_\_\_\_ Maiden/AKA \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_

List Two Prior Address:  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

U.S. Citizen: YES NO Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Sex: M F Age: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ Comp: \_\_\_\_\_  
Driver's License #: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Other State, Federal or City Licenses Held: \_\_\_\_\_

List all Employers in the Last 3 Years. Begin with the most recent. If Self-Employed, include name, address, dates and type of Business.

Business Name	Address	Phone	Position	Dates of Employmt
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

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CURRENT EMPLOYER INFORMATION

Business Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Owner's Name: List all Principals, Officers, Partners.

Title & Name	Home Address	Home Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

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LIVE ENTERTAINMENT & PATRON DANCE ONLY

Type of entertainment (Piano Bar, Etc.) \_\_\_\_\_ Parking Accommodations/Number \_\_\_\_\_  
Dance Floor Size \_\_\_\_\_ Seating Capacity \_\_\_\_\_

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SKILL GAMES OPERATOR ONLY

How Many Units: \_\_\_\_\_ Size of Room where units will be placed: \_\_\_\_\_  
Type of Games: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**ARREST & CRIMINAL INFORMATION**

\* HAVE YOU EVER BEEN ARRESTED OR "BOOKED" BY A LAW ENFORCEMENT OFFICIAL OR HELD FOR INVESTIGATION, OR INDICTED BY A GRAND JURY, OR APPEARED IN COURT ON A WARRANT, EITHER AS A JUVENILE OR ADULT, OR AS A CIVILIAN, OR A MEMBER OF THE ARMED FORCES?  
 If the answer is YES to any of the above, you must list each incident below. Attach any additional information on a separate sheet. This form must be completed in order to have your permit process begin.

I HEREBY CERTIFY UNDER THE PENALTY OF PERJURY THAT I HAVE NEVER BEEN ARRESTED BY ANY LAW ENFORCEMENT AGENCY, HELD FOR INVESTIGATION, INDICTED BY A GRAND JURY OR THE SUBJECT OF ANY CRIMINAL PROSECUTION. I FULLY UNDERSTAND THAT OMITTING ANY INFORMATION BELOW WILL RESULT IN THE DENIAL OF THE PERMIT REQUESTED.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Original Arrest Charge (Crime): \_\_\_\_\_ Violation Date: \_\_\_\_\_  
 Disposition of Charge: \_\_\_\_\_ Final Charge: \_\_\_\_\_  
 Arresting Agency-City: \_\_\_\_\_

Original Arrest Charge (Crime): \_\_\_\_\_ Violation Date: \_\_\_\_\_  
 Disposition of Charge: \_\_\_\_\_ Final Charge: \_\_\_\_\_  
 Arresting Agency-City: \_\_\_\_\_

Original Arrest Charge (Crime): \_\_\_\_\_ Violation Date: \_\_\_\_\_  
 Disposition of Charge: \_\_\_\_\_ Final Charge: \_\_\_\_\_  
 Arresting Agency-City: \_\_\_\_\_

Original Arrest Charge (Crime): \_\_\_\_\_ Violation Date: \_\_\_\_\_  
 Disposition of Charge: \_\_\_\_\_ Final Charge: \_\_\_\_\_  
 Arresting Agency-City: \_\_\_\_\_

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION GIVEN IS TRUE AND CORRECT AND THAT ANY FALSE, OR WITHHOLDING OF, INFORMATION MAY SUBJECT ME TO CRIMINAL PROSECUTION AND IS GROUNDS TO DENY OR REVOKE MY LICENSE OR PERMIT. I FURTHER UNDERSTAND THAT I CANNOT OPERATE THIS BUSINESS OR CONDUCT THE ACTIVITY FOR WHICH THE PERMIT IS REQUIRED UNTIL A PERMIT HAS BEEN ISSUED. I ALSO UNDERSTAND THAT I AND MY EMPLOYEES MAY BE FINGERPRINTED AS A CONDITION OF OBTAINING THIS LICENSE OR PERMIT.

SIGNATURE: \_\_\_\_\_ DATE/TIME: \_\_\_\_\_

FEE PAID: \_\_\_\_\_ DATE: \_\_\_\_\_ WITNESSED BY: \_\_\_\_\_

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**FOR OFFICIAL USE ONLY**

LOCAL RECORD	NEGATIVE	SEE ATTACHED	DATE FINGERPRINTS SENT CII:		
O.C. RECORD	NEGATIVE	SEE ATTACHED	DDL RECORD	NEGATIVE	SEE ATTACHED
A.B.C. RECORD	NEGATIVE	SEE ATTACHED	MCAPS RECORD	NEGATIVE	SEE ATTACHED
CII RECORD	NEGATIVE	SEE ATTACHED	NCIC RECORD	NEGATIVE	SEE ATTACHED
DISCREPANCIES IN APPLICANT'S STATEMENT AND RECORD CHECKS			NEGATIVE	SEE ATTACHED	
BUSINESS ESTABLISHMENT INFORMATION			NEGATIVE	SEE ATTACHED	
INVESTIGATING OFFICER'S COMMENTS (INITIALS)			OKAY	SEE ATTACHED	
PERTINENT RULES EXPLAINED			YES	NO	N/A
APPLICANT REQUESTS TERMINATION OF PERMIT: _____			REASON: _____		

RECOMMENDATION: GRANT: \_\_\_\_\_ TERMINATE: \_\_\_\_\_  
 DENY: \_\_\_\_\_ OTHER: \_\_\_\_\_

INVESTIGATING OFFICER: \_\_\_\_\_ DATE: \_\_\_\_\_

SUPERVISOR APPROVING: \_\_\_\_\_ DATE: \_\_\_\_\_

PERMIT APPROVED/DENIED BY FINANCE DEPARTMENT \_\_\_\_\_ DATE/TIME: \_\_\_\_\_  
 PERMIT #: \_\_\_\_\_