



CITY OF NEWPORT BEACH

REVENUE DIVISION

100 CIVIC CENTER DR • P.O. BOX 1768
NEWPORT BEACH, CA 92658-8915
(949) 644-3141 • License@newportbeachca.gov
www.newportbeachca.gov/Revenue

- | | | | |
|--|---------|--|---------|
| <input type="checkbox"/> PAWNBROKER PERMIT APPLICATION | \$91.00 | <input type="checkbox"/> SECONDHAND PERMIT APPLICATION | \$91.00 |
| <input type="checkbox"/> PAWNBROKER RENEWAL | \$60.00 | <input type="checkbox"/> SECONDHAND RENEWAL | \$60.00 |

Fees due upon submittal.

Make check payable to **City of Newport Beach.**

APPLICANT INFORMATION

Name: _____ Maiden / AKA: _____
 Address: _____ Suite: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____
 Drivers License: _____ State: _____ M F Height: _____ Weight: _____ Hair: _____ Eyes: _____
 Social Security: _____ Other Federal, State or City Licenses Held: _____
 Place of Birth: _____ US Citizen? YES / NO Date of Birth: _____

EMPLOYMENT INFORMATION

List all employers in the last three (3) years. Begin with your most recent employment. If Self-Employed, include name, address, dates, and type of business conducted. Attach additional sheets, if necessary.

Business Name	Address	Phone	Position	Employment Dates
---------------	---------	-------	----------	------------------

CURRENT EMPLOYER INFORMATION

Business Name: _____ Phone: _____
 Address: _____ Suite: _____
 City: _____ State: _____ Zip: _____

Owner Information: List all Principals, Officers, and/or Partners

Name	Title	Home Address	Phone
------	-------	--------------	-------

Please Continue to Back of Form

ARREST AND 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 member of the Armed Forces?

If the answer is YES to any of the above questions, 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.

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: _____

If the answer to all the above questions is NO, please sign the declaration below.

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, WITH NO REFUND OF THE APPLICATION FEES.

 Name (Printed) Signature Date

DECLARATION

I HEREBY CERTIFY UNDER THE PENALTY OF PERJURY THAT THE INFORMATION STATED IS TRUE AND CORRECT. I UNDERSTAND THAT BY PROVIDING FALSE OR WITHHOLDING INFORMATION IS GROUNDS FOR DENIAL OR REVOCATION OF MY PERMIT, AND MAY SUBJECT ME TO CRIMINAL PROSECUTION. I DO HEREBY AUTHORIZE THE CITY, ITS AGENTS AND EMPLOYEES TO SEEK VERIFICATION OF THE INFORMATION CONTAINED ON THIS APPLICATION. I FURTHER UNDERSTAND THAT I MAY NOT CONDUCT THE ACTIVITY APPLIED FOR UNTIL A LICENSE HAS BEEN GRANTED. I UNDERSTAND THAT A COPY OF THE CITY ORDINANCES REGULATING RETAIL SALES OF FIREARMS IS AVAILABLE TO ME AT THE CITY CLERKS OFFICE.

 Name (Printed) Signature Date

OFFICE USE ONLY

RECOMMENDATION: GRANT DENY TERMINATE OTHER: _____

INVESTIGATING OFFICER _____ Date: _____

SUPERVISOR APPROVING _____ Date: _____

REVENUE MANAGER: _____ Date: _____

PERMIT NO. _____ DATE ISSUED: _____ FEE PAID: \$ _____