

# WESTMINSTER POLICE DEPARTMENT PERMIT APPLICATION

Business/Organization Name					Telephone		Purpose for Permit		
Street Address					City			Zip	
Name of Applicant/Owner				Address/City/Zip				Telephone	
Sex	Hair	Eyes	Height	Weight	Date of Birth		Social Security Number		California Driver's License
Name of Owner				Address/City/Zip				Telephone	
Sex	Hair	Eyes	Height	Weight	Date of Birth		Social Security Number		California Driver's License
Name of Co-Owner				Address/City/Zip				Telephone	
Sex	Hair	Eyes	Height	Weight	Date of Birth		Social Security Number		California Driver's License
Business Information - Description of Business Activity - goods or services provided to customers									
Vehicle(s) used for business									
Make	Year	Model	Color	License No.	Registered Owner's Name and Address				
Make	Year	Model	Color	License No.	Registered Owner's Name and Address				
Last place of business								Dates	
List any arrests and/or convictions of any violation of law, including vehicle cites/fines over \$15.00									
Any false, misleading or fraudulent statement, whether knowingly or negligently made in connection with this application or in any document required by the Chief of Police, will result in denial or revocation of permit. Permit is not transferable to another person. Filing of an application and payment of fees does not allow applicant to work. The receipt is not a work permit.									
Signature _____					Date _____				
Please attach the following document: Copy of California driver's license									

<b>OFFICIAL USE ONLY</b>									
File Fee \$	_____	Receipt No.	_____	Received by:	_____	Fingerprints	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Approved	_____				Denied	_____			
	Chief of Police (or designee)					Chief of Police (or designee)			
Effective Date	_____	Expiration Date	_____	Permit No.	_____	Date Issued	_____		