APPLICATION MUST BE SUBMITTED NO LATER THAN 14 BUSINESS DAYS PRIOR TO EVENT

WESTMINSTER POLICE DEPARTMENT
SPECIAL EVENT PERMIT APPLICATION

Event Location Name	Telephone	Purpose for Permit

Event Address	City	Zip

Organization Name	Telephone

Street Address	City	Zip

Name of Applicant/Person In Charge	Address/City/Zip	Telephone

Sex	Hair	Eyes	Height	Weight	Date of Birth	Social Security Number	CA Driver's License

Business Information - Description of Business Activity - goods or services provided to customers

Date of Event	Time	Type

Special Event - Name of Insurance

Security - Name of Company	Address

Additional Information _____

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

FOR OFFICE USE ONLY

File Fee $ _____ Receipt No. _____ Received by: _____ Non Profit ☐ Commercial ☐

Approved _____
Chief of Police (or designee)

Denied _____
Chief of Police (or designee)

Date From: _____ Date To: _____

Time From: _____ Time To: _____

Permit No. _____ Date Issued : _____

WPD #4 (Rev. 10/08)