CITY OF SANTA BARBARA



PERMIT APPLICATION PROCESS FORTUNETELLER

City of Santa Barbara Municipal Code, Chapter 5.40

Name of Applicant:		
Complete application. Make certain you have all your support documentation below as part of your entire Application F AccountsReceivable@santabarbaraca.gov. City will contact you by email when you can come to City Hall to pay permi		cation to
Notice to Applicant: Follow the steps below to have your application		
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STEP 1. Email completed application to:	DATE	CITY AGENT SIGNING
accountsreceivable@santabarbaraca.gov	COMPLETED	OFF ON COMPLETION
a. A permit application form.		COMPLETION
b. A photocopy of your driver's license.		
c. Two (2) passport size color photos.		
d. A printed statement, outlining the services to be provided.		
e. A printed list of locations (by address) where you have worked as a Fortuneteller.		
f. Complete Live Scan Form		
g. Payment of \$20.00 application fee.		
STEP 2. AT COMMUNITY DEVELOPMENT BUILDING,	DATE	CITY AGENT SIGNING
630 GARDEN STREET:	COMPLETED	OFF ON COMPLETION
a. Because you require a fixed business location, you must obtain		OCIVII ELITIOIY
clearance from Community Development Department, Planning		
and Zoning Division.		
Additional fees are assessed at Community Development		
 b. Upload completed Proposed Permit Use Clearance forms along along with your site plan and floor plan to Building & Safety. Visit 		
the City's Apply for a Permit page for permit submittal guidance.		
Community Development (805)564-5485.		
c. The Proposed Permit Use Clearance forms will be routed to the variance departments for sign-off.		
d. This process can take anywhere from 2 to 4 weeks.		
f. Once use is approved by all departments you can proceed to Step 3.		
	•	
STEP 3. AT POLICE DEPARTMENT, RECORDS BUREAU,	DATE	CITY AGENT SIGNING
215 E. FIGUEROA STREET	COMPLETED	OFF ON
		COMPLETION
 When you paid your application fee, you were given a "Request for Live Scan" form, which is used by the Police Department for 		
fingerprinting. The form was filled out by staff at City Hall.		

b. Make sure you have this form and call (805) 897-2355 to set up	
an appointment to be fingerprinted. There is an additional rolling fee at	
the Police Department for this service. You must make an appointment	
within 30 days of submitting your application to City Hall.	
b. Go to the Police Department, Records Bureau, 215 E. Figueroa	
Street to be fingerprinted.	
c. After you are finished, go to the Investigative Division Office, and	
leave your application packet with the clerk. You may call	
their offices at (805) 897-2333, if you have any questions. Do	
not leave your application at the Records Bureau.	
Completed application must be submitted to the Investigative	
Division before the first Thursday of the month in order to be	
considered at that month's Fire and Police Commission meeting.	
-	

	Police Department Use (Only
To be completed by P	olice Permit Investigator:	
	f Santa Barbara Police Department records ch Warrants B.U.S.T.E.D. D.M.V.	
Police permit investiga	ator's recommendations on the issuance of the	permit to the applicant:
CHIEF OF POLICE	Approval of permit application:	Date:
	Disapproval of permit application:	Date:



CITY OF SANTA BARBARA

APPLICATION FOR CITY PERMIT

TYPE: FORTUNETELLER

Permit/ID Number#

Santa Barbara Municipal Code, Chapter 5.40

Please complete the following:

rease complete the following.				
Date of Application:				
lame:				
A.K.A. (list "also known as" names):				
Residence Address (include street, ci	ity, and zip code):			
failing Address, if different (include	e street, city, and zip code):			
Phone Number:		Social Securit	y No:	
California Driver's License No. submit photocopy)		Are you a U.S	. citizen?	
Date of Birth:	Place of Birth:			
		1.1 = 1 = 1 = 4 .	Weight:	
Color of Hair:	Color of Eyes:	Height:	vveignt.	
Color of Hair: ength of time in Santa Barbara:	Color of Eyes:	Length of time	, and the second	
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ate of issua	permits presently or previously issued in and	ther city or state. List by	permit title, c	ity ar
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Date:	Pory: If you have had any arrests, list all of the Give the date (approximate), place (city and state): Place (city and state):	m. Use an additional sheet in a state), and the reason for Reason:	f necessary. the arrest.	
rrest Hist	Pory: If you have had any arrests, list all of the Give the date (approximate), place (city and state):	m. Use an additional sheet in a state), and the reason for Reason:	f necessary. the arrest.	



Signature (Permit Applicant)

CITY OF SANTA BARBARA

AUTHORIZATION TO RELEASE INFORMATION TO THE

CITY OF SANTA BARBARA, POLICE DEPARTMENT

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

As an applicant for a City permit within the City of Santa Barbara, I hereby authorize the release of any and all information that you may have concerning my work records education records, medical records, and information of a confidential or privileged nature to the City of Santa Barbara Police Department and its agents.

which may result from furnishing the information requested.
Printed (Permit Applicant's Name)
Timesa (Forme Approant & Namo)

Date



CITY OF SANTA BARBARA

INSTRUCTIONS FOR DRAWINGS

for submission to

COMMUNITY DEVELOPMENT DEPARTMENT Building and Safety Division 630 Garden Street

- 1. Site Plan with the following information and drawn in 1/8 or 1/4 inch scale:
 - a. Lot size.
 - b. All structures with building dimensions.
 - c. Show exits from subject structure and path of travel to the public way.
 - d. Number of existing parking spaces.
 - e. Indicate location and height of all walls and fences.
 - f. Any bicycle parking locations that serve the proposed site.
 - 2. Floor Plan with the following information and drawn in 1/8 or 1/4 inch scale: (You may also use an existing architectural floor plan of the building.)
 - a. Identify size in square feet and use of all rooms/areas.
 - b. Calculate the occupant loads (using California Building Code) for egress and minimum plumbing fixture requirements.
 - c. Provide location and type of existing and proposed exit signs and illumination.

Any establishments with occupant loads in excess of 50 persons shall be equipped with internal or external illumination or self-luminous type exit signs.



Community Development Department 630 Garden Street

Building and Safety Division
Business hours 8:30 a.m. to 12:00 noon and 1:00 p.m. to 4:30 p.m.
Monday through Friday, except holidays
Phone: 564-5485

Please present this completed form at the above address: Date of Application: Type of Permit applied for: Applicant's Name: _____ The person named above is applying to the City for a permit to conduct a business that requires Building and Safety Division approval. Please review to determine the proposed or current site meets requirements for this type of business. Business Address: Name of Business: Type of Business: Contact phone number: Residential Business Other) New permit () Renewal of permit () New address for business () Existing address for business Building Type: _____ Building Permit Required: ____ Certificate of Occupancy Required: Occupancy Group: **BUILDING OFFICIAL** To be completed by Community Development Department: **PERMIT USE APPROVED PERMIT USE NOT APPROVED** Signature Date **COMMENTS:**



Community Development Department 630 Garden Street

Planning Division
Business hours 8:30 a.m. to 12:00 noon and 1:00 p.m. to 4:30 p.m.
Monday through Friday, except holidays
Phone: 564-5470

Please present this complete	ed form at the above address:	
Date of Application:		
Type of Permit applied for:		
Applicant's Name:		
		onduct a business that requires Planning/Zoning current site meets requirements for this type of
Business Address:		
Name of Business:		
Type of Business:		·
Contact phone number:	Residential	
	Business	
	Other	
() New permit () Rene	ewal of permit () New address fo	or business () Existing address for business
Land Use Zone:		
To be completed by Com	nmunity Development Departme	ent: ZONING OFFICIAL
PERMIT USE APP	ROVED	PERMIT USE NOT APPROVED
Signature		Date
COMMENTS:		



Community Development Department 630 Garden Street

Public Works Department
Business hours 8:30 a.m. to 12:00 noon and 1:00 p.m. to 4:30 p.m.
Monday through Friday, except holidays
Phone: 564-5485

Please present this completed form at the above addre	ss:
Date of Application:	
Type of Permit applied for:	
Applicant's Name:	
The person named above is applying to the City for a p Safety Division approval. Please review to determine the p of business.	
Business Address:	
Name of Business:	
Type of Business:	
Business Other	
() New permit () Renewal of permit () New a	ddress for business () Existing address for business
Building Type:	Building Permit Required:
Certificate of Occupancy Required:	Occupancy Group:
To be completed by Public Works Department:	PUBLIC WORKS OFFICIAL
PERMIT USE APPROVED	PERMIT USE NOT APPROVED
Signature	Date
COMMENTS:	



Fire Prevention Office - 925 Chapala St

Fire Department Fire Inspection

Business hours are 8:00 a.m. - 5:00 p.m. Monday through Friday, except holidays Call: (805) 564-5702 or

Email: FireInspectors@SantaBarbaraCA.gov for appointments.

Please present this completed form at the above address: Date of Application: Type of Permit applied for:_____ Applicant's Name: The person named above is applying to the City for a permit to conduct a business that requires Fire Department approval. Please review to determine the proposed or current site meets requirements for this type of business. Business Address: ______ Name of Business: _____ Type of Business: Contact phone number: Residential _____ Business _____ Other () New permit () Renewal of permit () New address for business () Existing address for business FIRE INSPECTION To be completed by Fire Inspector: **PERMIT USE APPROVED PERMIT USE NOT APPROVED** Print Name/ Body Number: _____ Signature: _____ Date: _____ APPROVED OCCUPANT LOAD: _____ COMMENTS:

State of California

REQUEST FOR LIVE SCAN SERVICE

BCII 8016 (3/07)

Applicant Submission			
ORI: Code assigned by DOJ Job Title or Type of License, Certification			
Agency Address Set Contributing Agency:			
Agency authorized to receive criminal history	information	Mail Code (five-digit code assigned by DO	OJ)
Street No. Street or PO Box		Contact Name (Mandatory for all school s	submissions)
City State	Zip Code	Contact Telephone No.	
Name of Applicant: (Please print) Last		First	MI
Alias: Last	First	Driver's License No:	
Date of Birth: Sex		Misc. No. BIL -	cy Billing Number
Height: Weight: _			
		Home Address:	
Eye Color: Hair Color	:	Street No. Street	eet or PO Box
Place of Birth:			
Social Security Number:		City, State and Zi	p Code
Your Number: OCA No. (Agency I	dentifying No.)	Level of Service: DOJ	FBI
Number:			
Employer: (Additional response for agencies sp	pecified by statute)		
Employer Name			
Street No. Street or PO Box	Ma	il Code (five digit code assigned by DOJ)	
City State	Zip Code (Ag) ency Telephone No. (optional)	
Live Scan Transaction Completed By:	Name of	f Operator	Date
Transmitting Agency	ATI No.		Amount Collected/Billed

Fingerprinting Locations Near Santa Barbara				
Location: Santa Barbara	<u>Address</u>	<u>Telephone</u>	<u>Website</u>	<u>Information</u>
Live Scan Santa Barbara City of Santa Barbara, Human Resources City of Santa Barbara, Police A1 Fingerprinting Plus Multiservice Santa Barbara, LLC Being & Doing, LLC	411 E Canon Perdido St #15, Santa Barbara, CA 9310 735 Anacapa St, Santa Barbara, CA 93101 215 E Figueroa St, Santa Barbara, CA 93102 3950 Via Real Ste 62, Santa Barbara, CA 93013 621 W Micheltorena St, Santa Barbara, CA 93101 510 Castillo St #201, Santa Barbara, CA 93101	(805) 564-5316 (805) 897-2355 (805) 452-9838	https://santabarbaraca.gov/ https://santabarbaraca.gov/ http://www.a1fingerprintingplus.com/ https://www.multiservicessb.com/	Call or schedule appointment online Call for appointment
<u>Location: Goleta</u>	<u>Address</u>	<u>Telephone</u>	<u>Website</u>	<u>Information</u>
Santa Barbara County Sheriff's Office Santa Barbara Corporate Services Lori's Mobile Notary & Fingerprinting	4434 Calle Real, Santa Barbara, CA 93110 5142 Hollister Ave, Santa Barbara, CA 93111 4390 Calle Real #A, Santa Barbara, CA 93110	(805) 450-0081	www.sbsheriff.org/home/fingerprinting https://sbcorporateservices.com/ https://www.lorismobilenotary.com/	Call or schedule appointment online Call or schedule appointment online Call or schedule appointment online
<u>Location: Buellton</u>	<u>Address</u>	<u>Telephone</u>	<u>Website</u>	<u>Information</u>
Skunk Bear Laserworks	900 McMurray Rd Ste 2, Buellton, CA 93427	(800) 765-4493	https://sblaserworks.com/	Call for appointment
<u>Location: Ventura</u> Jag Bookkeepong Inc.	Address 1767 Goodyear Ave Ste 104, Ventura, CA 93003	<u>Telephone</u> (805) 826-3231	Website https://jag-bookkeeping.com/	<u>Information</u> Call for appointment
Location: Santa Maria	Address	Telephone	Website	Information
Santa Barbara County Sheriff's Office Centro de Latino Services Local Copies Etc. Inc. Santa Maria Police Department	812-A West Foster Rd, Santa Maria, CA 93455 313 E Plaza Dr Ste B15, Santa Maria, CA 93454 1500 S Broadway, Santa Maria, CA 93454 1111 W Betteravia Rd, Santa Maria, CA 93455	(805) 934-6175 (805) 614-7595 (805) 928-5776	www.sbsheriff.org/home/fingerprinting https://www.centro4latinos.com/ https://localcopies.com/ https://www.cityofsantamaria.org/	Call or schedule appointment online Call or schedule appointment online Call for appointment Call for appointment
<u>Location: Lompoc</u>	<u>Address</u>	<u>Telephone</u>	<u>Website</u>	<u>Information</u>
Lompoc Police Department Box Shop Lee Mobile Live Scan and Notary Services	107 Civic Center Plaza, Lompoc, CA 93436 740 N. H St, Lompoc, CA 93436	(805) 735-1567	https://www.cityoflompoc.com/ https://www.boxshoplompoc.com/ https://www.805mobilelivescan.com/	Call for appointment Call for appointment Call for appointment
Location: Carpinteria	<u>Address</u>	<u>Telephone</u>	<u>Website</u>	<u>Information</u>
Reliant Notary Services	4915 Carpinteria Ave Ste G, Carpinteria, CA 93013	(805) 220-6999	https://reliantnotaryservices.com/	Call for appointment

Disclaimer:

Information listed does not include all fingerprinting agencies in the area. All information is gathered for your convenience, but we strongly recommend doing your own research. Please contact the live scan provider for information on operating hours, fees, and location information.

Please note that agencies may collect additional rolling fees or other provider fees. Fees may differ between providers.

All applicants must present current and valid photo identification to the live scan operator.