

CITY OF SANTA BARBARA

Permit #:

PD Received Date:

RENEWAL PROCESS SALE OF FIREARMS

Name of Applicant: Name of Business:			
Steps Completed with Finance	Complete full application and remit via email to AccountsReceivable@SantaBarbaraCA.gov Full Application must include the following:	Date completed & City Agent's initials.	
Step 1	Complete renewal forms. They will include:		
	□ Renewal Application form.□ Authorization to Release Information form.		
	Also submit the following documentation:		
	 □ Photocopy (front and back) of your driver's license. □ Photocopy of current Federal Firearms License from the Bureau of Alcohol, Tobacco, and Firearms (BATF). □ Photocopy of current Certificate of Eligibility from the □ Department of Justice. □ Photocopy of valid Board of Equalization Seller's Permit. 		
Step 2	Pay a \$10.00 renewal fee.		
	POLICE DEPARTMENT USE ONLY		
To be completed	by Police Permit Investigator:		
	City of Santa Barbara Police Department records check on applicant, Warrants, B.U.S.T.E.D., D.M. Santa Barbara Sheriff's record checks on applicant. City of Santa Barbara Police Department check with crimes against property to determine if there is information on applicant that would prohibit re-issuance of the permit.		
Police Permit Inve	estigator's recommendations on the re-issuance of the permit to the applicant:		
CHIEF OF POLIC	E OR DESIGNEE:		
Approval of renewal application: Date:			
Disapproval of rer			

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Applicant's Signature

CITY OF SANTA BARBARA

RENEWAL APPLICATION

TYPE: SALES OF FIREARMS

Permit #

Santa Barbara Municipal Code, Chapter 9.36

Please comple	ete the following renewal information:			
Applicant's Name:		Date of A	Date of Application:	
Residence Ad	dress (include street, city, and zip code):			
Mailing Addres	ss, if different (include street, city, and zip code)):		
Phone Number	er:			
California Driv (submit photocop	ver's License No. y)		Date of Birth:	
Business Nam	ne:			
Business Add	ress (include street, city, and zip code):			
Business Owr	ner's Name:		Business Phone Number:	
Arrest Histo	Ory: If you have had any arrests, list a Give the date (approximate), place		Use an additional sheet if necessary. tate), and the reason for the arrest.	
Date:	Place (city and state):		Reason:	
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	w indicates the applicant understand I, it may be grounds for denial of this p		ny information requested on this form is	

Date



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)

Date