



Application for Business Permit – Secondhand Dealer SBMC 5.44

Applicant Name

Applicant Title

Business Name

Submission Date

This application includes the following:

- Business and Owner Information Form (page 3)
- Disclosure of Criminal History Form (page 4)
- Authorization to Release Information (page 5)
- Instructions for Drawings (page 6)
- Proposed Permit Use Clearance Form – Building & Safety (page 7)
- Proposed Permit Use Clearance Form – Planning (page 8)
- Proposed Permit Use Clearance Form – Public Works (page 9)
- Proposed Permit Use Clearance Form – Fire Prevention (page 10)
- Finance & Police Use Only Form (page 11)
- Santa Barbara Municipal Code 5.44 (page 12)
- State of California Request for Live Scan Services (Department of Justice pages 1-4)

The following forms included in this application must be completed:

- ☐ Business and Owner Information (page 3)
- ☐ Disclosure of Criminal History (page 4)
- ☐ Authorization to Release Information (page 5)
- ☐ Proposed Permit Use Clearance Form – Building & Safety (page 7)
- ☐ Proposed Permit Use Clearance Form – Planning (page 8)
- ☐ Proposed Permit Use Clearance Form – Public Works (page 9)
- ☐ Proposed Permit Use Clearance Form – Fire Prevention (page 10)
- ☐ State of California Request for Live Scan Services (Department of Justice pages 1-4)



In addition to completing the forms within this application, provide the following:

- ☐ Site drawings, including site plans and floor plans (see page 6 for instructions)
- ☐ Copy of the front and back of applicant's driver's license, I.D., or passport
- ☐ A copy of your Seller's Permit
- ☐ A check for **\$300.00** made payable to *Department of Justice*

Submit Your Application and Schedule an Appointment:

- ☐ File the California Application for Secondhand Dealer or Pawnbroker License at the following link:
<https://capss-licensing.doj.ca.gov/public/applications/new?ori=CA0420300>
- ☐ Email this completed application and additional documents as a single pdf file to
AccountsReceivable@SantaBarbaraCA.gov
- ☐ [Make an appointment with the City of Santa Barbara](#) to remit a payment of **\$210.00**
- ☐ Make an appointment with a [Live Scan Provider](#) to get fingerprinted and have a background check performed. Additional fees will apply with the Live Scan Provider.



Business Information

Business Name/DBA: _____

Physical Address: _____

Mailing Address: _____

Email: _____

Phone: _____ Website: _____

Tax ID (FEIN or SSN): _____ Seller's Permit # (if applicable): _____

Business Start Date: _____ Application Submission Date: _____

Owner Information

Owner Name: _____

Physical Address: _____

Mailing Address: _____

Email: _____

Phone Number: _____

Driver's License/ID #: _____ Issuing State: _____ Date of Birth: _____

Describe the scope of your business activity:



Disclosure of Criminal History

Provide a complete history of all arrests. For each arrest, include the approximate date, the city and state where it occurred, and the reason for the arrest. Failure to list all arrests may result in a denial of your application. Attach a separate sheet if more space is needed. If there is no arrest history, write "N/A".

Date of Arrest: _____ Place (City, State): _____

Reason: _____

Date of Arrest: _____ Place (City, State): _____

Reason: _____

Date of Arrest: _____ Place (City, State): _____

Reason: _____

Date of Arrest: _____ Place (City, State): _____

Reason: _____

Are you on probation or parole? Check: Yes No Charge:

Are you required to register pursuant to penal code section 290? Check: Yes No

Signature below indicates the applicant understands that if any information requested on this form is misrepresented, it may be grounds for denial of this permit application.

Signature

Date



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.

"I hereby release you, your organization, or others, from any liability or damage, which may result from furnishing the information requested."

Applicant Name

Applicant Signature

Date



Instructions for Drawings

For Submission to Community Development Department – Building and Safety Division

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.



Proposed Permit Use Clearance Form

Community Development Department – Building and Safety Division

Location: City of Santa Barbara Community Development, 630 Garden Street, Santa Barbara, CA 93101

Business hours: Monday, Tuesday, Thursday 8:30am to 12:00pm; Wednesday 8:30am to 5:00pm

Phone: (805) 564-5485

Email: CDBuildingCode@SantaBarbaraCA.gov

Please present this completed form at the above address:

The person named below is applying to the City for a permit to conduct business that requires Building and Safety Division approval. Please review to determine the proposed or current site meets requirements for this type of business.

Application for New Business Permit – Secondhand Dealer SBMC 5.44

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Physical Address: _____

Mailing Address: _____

Email: _____

Phone: _____ Business Start Date: _____

Community Development Department Use Only

To be completed by Building Official

Approval of Permit Application: _____ Date: _____

Denial of Permit Application: _____ Date: _____

Comments: _____



Proposed Permit Use Clearance Form

Community Development Department – Planning Division

Location: City of Santa Barbara Community Development, 630 Garden Street, Santa Barbara, CA 93101

Business hours: Monday, Tuesday, Thursday 8:30am to 12:00pm; Wednesday 8:30am to 5:00pm

Phone: (805) 564-5470

Email: PlanningCounter@SantaBarbaraCA.gov

Please present this completed form at the above address:

The person named below is applying to the City for a permit to conduct business that requires Building and Safety Division approval. Please review to determine the proposed or current site meets requirements for this type of business.

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Submission Date

Physical Address: _____

Mailing Address: _____

Email: _____

Phone: _____ Business Start Date: _____

Community Development Department Use Only

To be completed by Zoning Official

Approval of Permit Application: _____ Date: _____

Denial of Permit Application: _____ Date: _____

Comments: _____



Proposed Permit Use Clearance Form

Public Works Department

Location: City of Santa Barbara Public Works, 630 Garden Street, Santa Barbara, CA 93101

Business hours: Monday, Tuesday, Thursday 8:30am to 12:00pm; Wednesday 8:30am to 5:00pm

Phone: (805) 564-5485

Email: CDBuildingCode@SantaBarbaraCA.gov

Please present this completed form at the above address:

The person named below is applying to the City for a permit to conduct business that requires Building and Safety Division approval. Please review to determine the proposed or current site meets requirements for this type of business.

Application for New Business Permit – Secondhand Dealer SBMC 5.44

Applicant Name

Applicant Title

Business Name

Submission Date

Physical Address: _____

Mailing Address: _____

Email: _____

Phone: _____ Business Start Date: _____

Community Development Department Use Only

To be completed by Building Official

Approval of Permit Application: _____ Date: _____

Denial of Permit Application: _____ Date: _____

Comments: _____



Proposed Permit Use Clearance Form

Fire Department – Fire Prevention Office

Location: City of Santa Barbara Fire Prevention Office, 925 Chapala Street, Santa Barbara, CA 93101

Business hours: Monday through Friday 8:30am to 5:00pm, except holidays

Phone: (805) 564-54702 **Email:** FireInspectors@SantaBarbaraCA.gov

Please present this completed form at the above address:

The person named below is applying to the City for a permit to conduct business that requires Fire Department approval. Please review to determine the proposed or current site meets requirements for this type of business.

Application for New Business Permit – Secondhand Dealer SBMC 5.44

Applicant Name

Applicant Title

Business Name

Submission Date

Physical Address: _____

Mailing Address: _____

Email: _____

Phone: _____ Business Start Date: _____

Fire Department Use Only

To be completed by Fire Inspector

Approval of Permit Application: _____ Date: _____

Denial of Permit Application: _____ Date: _____

Approved Occupant Load: _____

Comments: _____



Finance Department Use Only

To be completed by Accounts Receivable staff

Permit Type:_____

Applicant Name:_____

Application Received by:_____Date:_____

Application Paid Amount:_____Date:_____

Police Department Use Only

To be completed by Police Permit Investigator

City of Santa Barbara Police Department records check on applicant:

- ☐ Versadex
- ☐ CLETS Check
- ☐ Local criminal history check and review of live scan results from the D.O.J.

Police permit designee's recommendations on the issuance of the permit to the applicant:

Recommendations:

Completed By:_____Date:_____

Chief of Police

Approval of Permit Application:_____Date:_____

Denial of Permit Application:_____Date:_____



Santa Barbara Municipal Code Chapter 5.44

§ 5.44.010 Definitions

"Secondhand dealer" means any person commencing, conducting or carrying on the business of buying, selling or otherwise dealing in secondhand or antique goods, wares, clothing or merchandise; provided, however, that nothing in this chapter shall apply to the exchange of secondhand furniture or furnishings as payment in whole or in part for new furniture or furnishings given in exchange by a regular dealer in new furniture or furnishings; provided further, that nothing in this chapter shall apply to the sale of any secondhand goods, wares or merchandise sold by any public warehouseman at any warehouse in the City for non-payment of any storage bill for the storage in such warehouse of goods, wares or merchandise so sold.

§ 5.44.020 Permit and Tax Required.

It is unlawful for any person to engage in, conduct, manage or carry on or purport to carry on in the City, the business of pawnbroker, secondhand dealer, junk dealer or junk collector without first applying for and receiving a permit, in writing from the Chief of Police and without first paying any applicable taxes as provided in Chapter 5.04. Said permit shall be valid for one year and shall be renewed each successive year.

§ 5.44.030 Application for Permit, Fees.

Any person desiring to obtain a permit to conduct or carry on any business mentioned in Section 5.44.010 shall file an application in writing therefor with the Chief of Police, specifying, by street and number, the place where such business is proposed to be conducted or carried on. Such application shall be signed by the applicant and shall contain the address of such applicant. The Chief of Police is authorized to charge fees to pay for Department of Justice charges for processing of applications for permits and licenses authorized by this code or State law.

§ 5.44.040 Issuance of Permit - Permit Prerequisite to Payment of Tax.

No permit to commence or conduct or carry on any business mentioned in Section 5.44.010 shall be granted by the Chief of Police to a person who fails, refuses, or neglects to comply with the laws or ordinances relating to and regulating the business for which such permit is sought. The Tax and Permit Inspector shall not accept payment of a tax from any person to conduct or carry on the business of pawn-broker, secondhand dealer, junk dealer or junk collector until the Chief of Police shall have granted a permit therefor.



§ 5.44.150 Records to be Kept.

Every pawnbroker, secondhand dealer, junk dealer and junk collector shall keep a complete record of all goods, wares, merchandise or things pledged to or purchased or received by him or her, which record shall contain all of the matters required to be shown in the reports referred to and described in this chapter. Every such record and all goods, wares, merchandise and things pledged to or purchased or received by any such pawnbroker, secondhand dealer, junk dealer or junk collector shall be open at all times during business hours to the inspection of any law enforcement officer.

§ 5.44.180 Holding Period Before Sale or Disposition - for Pawnbrokers and Secondhand Dealers.

No pawnbroker or secondhand dealer shall sell or otherwise dispose of any article or thing within 30 days after such article or thing has been purchased or received by such pawnbroker or second-hand dealer, except when the Chief of Police, for good cause, authorizes prior disposition with prior written authorization. During the required holding period, the article or thing so purchased shall not be altered, changed or defaced and shall remain and be during the period in the same condition as when purchased or received by the pawnbroker or secondhand dealer.

§ 5.44.220 Dealings with Minors.

No pawnbroker, secondhand dealer, junk dealer or junk collector shall purchase, or receive on deposit, or accept as a pledge any goods, wares, merchandise or anything whatsoever from, or make a loan to any person under the age of 18 years.

§ 5.44.250 Unlawful Acts.

It is unlawful for any person engaged in conducting, managing or carrying on the business of pawnbroker, secondhand dealer, junk dealer or junk collector or for any agent or employee of any such person to fail, refuse or neglect to file any report in the form, in the manner, at the time and in all respects in accordance with the requirements of this chapter, or to fail, refuse or neglect to keep a record in the form and in the manner required by this chapter, or to fail, refuse or neglect to exhibit to any law enforcement officer, immediately upon demand for the privilege of such inspection, any such record or any goods, wares or merchandise or things pledged to or purchased or received by such person.



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

CA0420300

ORI (Code assigned by DOJ)

Permit/License

Authorized Applicant Type

Secondhand Dealer/Pawnbroker

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Santa Barbara Police Department

Agency Authorized to Receive Criminal Record Information

04079

Mail Code (five-digit code assigned by DOJ)

PO Box 539

Street Address or P.O. Box

Business Office

Contact Name (mandatory for all school submissions)

Santa Barbara

City

CA

State

93102

ZIP Code

(805) 897-2333

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name: (AKA or Alias)

Last Name

First Name

Suffix

Date of Birth Sex ☐ Male ☐ Female ☐ Nonbinary/Unspecified

Driver's License Number

Height Weight Eye Color Hair Color

Billing
Number

(Agency Billing Number)

Place of Birth (State or Country) Social Security Number

Misc.
Number

(Other Identification Number)

Home
Address Street Address or P.O. Box

City State ZIP Code

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature

Date

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: ☐ DOJ ☐ FBI

(If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)

If re-submission, list original ATI
number:

Original ATI Number

(Must provide proof of rejection)

Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box

Telephone Number (optional)

City State ZIP Code Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator

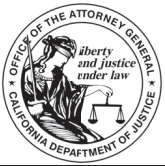
Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



REQUEST FOR LIVE SCAN SERVICE

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

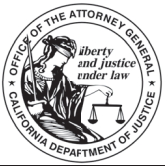
Possible Disclosure of Personal Information. In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:

Department of Justice
Bureau of Criminal Information & Analysis
Keeper of Records
P.O. Box 903417
Sacramento, CA 94203-4170



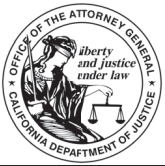
REQUEST FOR LIVE SCAN SERVICE

Privacy Act Statement

Authority. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.



REQUEST FOR LIVE SCAN SERVICE

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.²
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.³

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.⁴

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) *You can find additional information on the FBI website at <https://www.fbi.gov/about-us/cjis/background-checks>.*

¹ Written notification includes electronic notification, but excludes oral notification

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 28 CFR 50.12(b)

⁴ See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)