



Antique Shop *Section 103.301*

STEPS FOR OBTAINING A PERMIT

- 1. Submission:** Applications will not be accepted by mail. Please send your completed application documents by email to pcpermitapplications@lapd.online
- 2. Review:** Once received, an Investigator will review your application for completeness and reach out to schedule your in-person appointment.
- 3. Appointment:** During the appointment you will turn in the original application documents and complete the payment required for processing the permit with the Office of Finance.
- 4. Investigation:** The Investigator assigned to your case will complete the investigation and reach out to schedule your inspection.

PLEASE NOTE

- A California state license is required if you are selling tangible items defined as "personal property that bears a serial number or personalized initials or inscription or which at the time it is acquired by the secondhand dealer, bears evidence of having had a serial number or personalized initials or inscription". The cost of this license is \$300.00. If you acquire the state license, you will be registered with CAPS.
- Other police permits may apply to your business as determined by your investigator. The cost of processing applications for this permit is **\$379.00**, subject to change.
- CID does not have a designated area for visitors. If you plan to park on the street, metered parking is limited to 1 hour. Plan ahead, and allow extra time to find a parking garage. Please be prepared for any unexpected delays or parking issues.
- Permits are **not transferable**. If you are moving locations or there is a change in ownership, you are required to re-apply.

If your application remains incomplete 30 days after submission, your case will be filed without further action, and you will NOT be allowed to continue with the process. You may resubmit at any point after you have made the necessary changes to your application.

You can find more information pertaining to this permit at: https://codelibrary.amlegal.com/codes/los_angeles/latest/lamc/0-0-0-193526



Antique Shop Section 103.301

Business Name: _____

Business Address: _____

Forms & Documents Needed To Complete Application		DONE	N/A
1	Business Information - Face Sheet Form		
2	Owners & Applicants Form (<i>Ownership should equal 100%. If not, explain in the space provided</i>)		
3	Personal Application Form (<i>Each owner must complete this form</i>) - DO NOT SIGN UNTIL INSTRUCTED BY INVESTIGATOR OR HAVE FORM NOTARIZED		
4	Copy of the applicant's valid state Driver's License or state identification - <i>The address must match the applicant's information on the Personal Application</i> - <i>Shall not be expired</i>		
5	Completed Live Scan Form - <i>Only valid for 30 days from date on the live scan form, do not complete until instructed to do so by investigator</i> - <i>If residing in California, go to any Live Scan location: https://oag.ca.gov/fingerprints/locations?county=Los%20Angeles</i> - <i>If out-of-state, fingerprint cards are available. These require: 1. Check payable to California Department of Justice for \$32 per card and 2. Request for Exemption form per applicant card</i>		
6	Original Zoning & Clearance From - <i>Bring the form provided (page 9) to the Department of Building and Safety, Zoning Administration</i> - <i>Must submit original form (Signature, date, contact number, and stamp needed or will not be accepted)</i> - <i>Follow the instructions on the procedure form (page 10) to schedule your appointment</i>		
7	Statement on Types of Goods Sold		
8	Statement of Inapplicability (<i>if not selling tangible goods</i>)		
9	Requirements for Applicants Applying Through an Aide - <i>Consultant teams will need a letter of authorization from the applicant to submit</i> - <i>If an employee of the applicant is submitting, use a Designation of Qualified Manager form (page 13)</i>		
10	State Live Scan (<i>only required if also applying for state license</i>)		
11	Copy of Complete Lease Agreement and/or Finalized Purchase Documents - <i>Must indicate legal/applicant's name(s), business address, current lease dates and usage</i> - <i>Include supplemental documents, amendments, & assignments. Provide a lease history chart if needed. Anyone listed as a lessee must submit a personal application</i>		
12	Affidavit of Property Owner - Consent to Operate (Only if needed) - <i>Needed only if the lease does not state the type of usage in the lease</i> - <i>Must be filled out and signed by the property owner or a property agent</i> - <i>If the owner is unable to be present to sign at the appointment, the form must be notaried</i>		
13	Copy of Fictitious Name Statement (<i>not required if the legal name and the DBA are the same</i>) - <i>Required for all applicants (whether sole proprietorship, partnership, LLC, corporation, etc.). Your business's DBA must be registered with the County of Los Angeles: https://www.lavote.gov/home/county-clerk</i>		
14	Entity Checklist - <i>Refer to page 3 to review which documents are applicable to your application</i>		
15	Copy of Municipal Code pertaining to Secondhand Police Permits (<i>For informational purposes only</i>)		



Antique Shop

Section 103.314.1

Business Name: _____

Business Address: _____

**** Your business must be registered in California to do business in this state.***

Additional Forms Needed To Complete Application Per Business Entity Type	Select Applicable
Sole Proprietorship - Fictitious Name Statement	
Partnership - A Partnership agreement naming all partners; or - Certificate of Limited Partnership for limited partners certified by the Secretary of State - Fictitious Name Statement	
Limited Liability Companies (LLC) - Articles of Organization - Operating Agreement (Identifying all members) - Fictitious Name Statement - All members must apply	
Corporation (C-Corp, S-Corp and Professional Corp) - Corporate Resolution or Meeting Minutes (Identifying officers & signed by Corporate Secretary) - Articles of Incorporation (Certified by the State of CA); if out of State, submit equivalent - Copy of Stock Certificates - Fictitious Name Statement - All officers and all persons owning a controlling interest in a non publicly traded corporation must apply	

****All forms detailed above must be submitted according to the business entity the applicant(s) is filing as. Any form or document not completed or provided at the time of submission will result in an incomplete application. Only complete applications will be accepted for processing by permit staff.***



Business Information - Face Sheet

A Face Sheet must be completed for each permit type for each location. For example, if a business needs a Dance Hall Permit and a Pool permit, two Face Sheets must be completed.

For Police Commission Use Only - Do Not Write In This Section

Antique Shop

Type of Permit: _____

PC Account No: _____

PC File No: _____

Grant Date: _____

LAPD Area: _____

RD No: _____ Council District No: _____

CID Staff Stamp Here

Complete All Fields - Do Not Leave Anything Blank

Type of Business Entity: (Please check one)

Sole Proprietorship _____ Partnership _____ Limited Liability Company (LLC): _____

Corporation _____ Non-Profit _____ Other: _____

Entity Name: _____

Doing Business as (DBA): _____

Business Address: _____
(Must include: Apartment, Suite, Space, Unit numbers, etc.)

City: _____ Zip Code: _____

Mailing Address: _____
(If address is same as above, write "same")

City: _____ State: _____ Zip Code: _____

Contact Phone No: _____ Business Phone No: _____

Email of Business: _____



Owners and Applicants Form

This form must be completed for each owner or person(s) required to apply for the PC Permit, indicating the percentage of ownership for each applicant. The percentage of ownership should add up to 100%; if not, please explain in the space provided.

Doing Business as (DBA): _____

Name (All Required Applicants)	Title (President, CEO, CFO, Secretary, etc.)	Percent of Ownership
Total Percentage of Ownership		

If the percentage of ownership does not add up to 100%, explain below:



Personal Application

Per LAMC Chapter X, all owners and partners must complete the required forms. Providing incomplete or inaccurate information may delay or impede the processing of your application. False or misleading information on these forms may result in legal consequences.

Applicant Personal Information - Do Not Leave Anything Blank

Name of Applicant: _____

Home Address: _____
(Must include: Apartment, Suite, Space, Unit numbers, etc.)

City: _____ Zip Code: _____

Contact Phone No: _____ Business Phone No: _____

Email Address: _____

DOB: _____ Driver's License/ID: _____ State: _____

Gender: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Applicant History - Do Not Leave Anything Blank

If married, will your spouse be involved with the business? Yes _____ No _____
(If you answered yes and are applying as a sole proprietor or partnership, your spouse must apply.)

Have you ever used any other names in the past? Yes _____ No _____

If yes, list other names used: _____

List previous permits held: _____

Have you ever been denied, suspended or revoked a Police Commission Permit? Yes _____ No _____

Have you ever been arrested for a crime resulting in a conviction? Yes _____ No _____

If you answered "YES," please provide details:

Date: _____ City: _____

Charge: _____ Disposition: _____

Details: _____

****Use additional pages if needed.***

READ CAREFULLY BEFORE SIGNING

I declare under the penalty of perjury and under the law of the State of California, all information contained on this Police Permit Application and any supplemental documents is true and correct. I understand that all information provided and statements made are subject to investigations and any false statements may be grounds for denial or revocation of permits issued by the Los Angeles Police Commission.

All applicants not present to sign must have this application form NOTARIZED. The notary shall stamp and sign this form or provide the proper Acknowledgement/Jurat. The document must be titled "Application for Police Permit" or it will not be accepted.



DO NOT SIGN UNTIL INSTRUCTED TO DO SO - Must be witnessed by a Deputy City Clerk or prepared by a Notary Public.

Applicant's Signature: _____ Date: _____

Print Name: _____

Witness Signature: _____ Print Name: _____ Date: _____

REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

*****FOLLOW INSTRUCTIONS BELOW*****

ORI: CA0194200 Type of Application: LICENSE CERT OR PERMIT
 Job Title or Type of License, Certification or Permit: *****-> POLICE COMMISSION PERMIT

Agency Address Set Contributing Agency: LAPD (CAPDLOS ANGELES) 14923 ← **LAPD has many codes. Use this.**
 Agency authorized to receive criminal history information Mail Code (five digit code assigned by DOJ)
700 E. TEMPLE ST. STE B22
 Street No. Street or P.O. Box Contact Name (Mandatory for all school submissions)
LOS ANGELES CA 91351 (213) 996-1210
 City State Zip Code Contact Telephone No.

*****ENTER INFORMATION FOR 1 – 11b*** Live Scan Operator: Be sure to enter all items.**

Name of Applicant: 1
 (please print) Last First MI
 Alias: 2 Driver's License No. 3
 Last First 5
 Date of Birth: 4 Sex: Male Female Misc. No. BIL- N/A
 Agency Billing Number
 Height: 6 Weight: 7 Misc No: _____
 Eye Color: 8 Hair Color: 9 Home Address: 11a
 Street or P.O. Box
 Place of Birth: 10 11b _____
 City, State and Zip Code
 SOC: *****DO NOT ENTER SOCIAL SECURITY*****

*****MAKE TWO COPIES. GO TO LIVE SCAN CENTER.*****

Your Number: TRC# Level of Service DOJ FBI
 OCA No. (Agency Identifying No.)
 If resubmission, list Original ATI No. _____

Employer: (Additional response for agencies specified by statute) *****DO NOT USE THIS SECTION*****
 Employer Name _____
 Street No. Street or P.O. Box Mail Code (five digit code assigned by DOJ)
 City State Zip Code () _____
 Agency Telephone No. (optional)

Live Scan Transaction Completed By: _____ Date: _____
 Name of Operator
 Transmitting Agency _____ ATI No. _____ Amount Collected/Billed

LAPD 02/2016

GIVE COPIES OF FORM:
 ORIGINAL-Live Scan Operator; SECOND COPY-SEND TO LAPD; THIRD COPY-Keep
 BCII 8016 (Rev 04/01)



APPLICATION FOR SECONDHAND DEALER OR PAWNBROKER LICENSE

A. Type of Application (Check the appropriate box):

- Application for Secondhand Dealer License (21641 B&P)
- Application for Pawnbroker License (21300 FC)
- Application for Renewal:
 - Secondhand Dealer License (21642 B&P) State License No.: _____
 - Pawnbroker License (21301 FC) State License No.: _____
- Modifications (change of business, name, address, etc.)

DOJ USE ONLY	
Received:	_____
Check #	_____
Check Amt:	_____

B. Licensing Agency Information: (Completed by licensing agency only.)

Licensing Agency (Substation if applicable)	Date
Mailing Address	
Licensing Official (Name, Title)	Phone

THE FOLLOWING SECTIONS ARE TO BE COMPLETED BY THE APPLICANT(S)

C. Business Owner(s): (Name of individual, partners, or corporate officers)

Name	Date of Birth	Title	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ATTACH ADDITIONAL SHEET IF NECESSARY. CHECK CIRCLE IF ADDITIONAL SHEET IS USED

D. Business Information

Business Name	Phone	
Street Address	City	Zip Code
Business Ownership: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation (If corporate name differs from business name, complete the following):		
Corporation Name	Phone	
Street Address	City	Zip Code

E. Off-Site Storage Location:

Will property belonging to the business be stored off the business premises? Yes* No *If "yes," please provide the information below:

Off-Site Storage Street Address	City	Zip Code
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F. Multiple Secondhand Dealer or Pawnbroker Businesses:

Do any parties to this application have a financial interest in any other Secondhand Dealer or Pawnbroker Business in California?

- Yes* No *If "yes," please provide the Business Name, Address, City, and State assigned Secondhand Dealer or Pawnbroker License Number on an additional sheet of paper, and check circle if additional sheet is used

G. Additional Information:

Have any parties to this application ever been convicted of an attempt to receive stolen property or any other property-related crime?

- Yes* No *If "yes," please provide the applicant's name, date, and details on the arrest or conviction on an additional sheet of paper, and check circle if additional sheet is used

H. Certification:

"As the person responsible for completing the application for the business, I certify under penalty of perjury that the information on this application is true and complete to the best of my knowledge."

SIGNATURE	TITLE	DATE
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INSTRUCTIONS AND INFORMATION FOR COMPLETING THE APPLICATION FOR SECONDHAND DEALER OR PAWNBROKER LICENSE

Section A. TYPE OF APPLICATION

For a new application, the applicant must identify the type of business license by checking the appropriate box. If the application is for a renewal of an existing state secondhand dealer's license or pawnbroker's license, the licensee must check the appropriate box and provide the state license number. If the application is for an initial pawnbroker's license, ensure that the surety bond and financial statement are filed with the issuing agency. If the application is for a renewal of a pawnbroker's license, ensure that the surety bond is filed with the issuing agency. If the application is for a modification of an existing state secondhand dealer's or pawnbroker's license, the licensee must check the modification box and provide the state license number.

Section B. LICENSING AUTHORITY INFORMATION

The licensing agency shall complete Section B. Enter agency information, the name, title, and phone number of official processing the application. Enter the date the completed application was received by your agency for transmittal to the Department of Justice (DOJ).

Section C. BUSINESS OWNERS

- If business is *Individually owned*, enter owner's name, date of birth, title, and home phone number.
- If business is a *Partnership*, enter each partner's name, date of birth, title, and home phone number.
- If business is a *Corporation*, enter each corporate officer's name, date of birth, title, and home phone number.
- To complete the application package, all parties listed in this Section must submit fingerprints for criminal offender record information background checks.
- Live Scan submissions, please submit a completed copy of the REQUEST FOR LIVE SCAN SERVICE, Applicant Submission form BCIA 8016SHDPB. The Applicant Submission form (BCIA 8016SHDPB) for the State Secondhand Dealer and Pawnbroker Unit includes pre-printed information.

Section D. BUSINESS INFORMATION

- Enter the business name and, if applicable, corporation name.
- Enter the address information of the business and, if applicable, corporation address.
- If the corporation name differs from the business name in Section D-1, provide the requested information.
- Check the appropriate type of business ownership.

Section E. OFF-SITE STORAGE LOCATION

If the applicant intends to store property belonging to the business other than at the business address in Section D, above, enter the Off-Site Storage Information. Exemption from disclosure of the off-site storage, on the licensure form, will require the local licensing agency to file with DOJ written instruction for exemption.

Section F. MULTIPLE SECONDHAND/PAWNBROKER BUSINESSES

If the response is "YES", attach a sheet disclosing: the business name, address, city, zip code, phone number and state assigned license number. If "NO", proceed to Section G.

Section G. ADDITIONAL INFORMATION

If the response is "YES", attach a sheet disclosing: applicant's name, date and details of the arrest, conviction and if available copy of the court disposition. If the response is "NO", proceed to Section H.

Section H. CERTIFICATION STATEMENT

The person responsible for completing the application or person responsible for the business must sign and date the certification.

DEPARTMENT OF JUSTICE FEE SCHEDULE:

Secondhand Dealer/Pawnbroker Application, JUS 125 = \$300 (New or renewal application, payable to DOJ)
Criminal Offender Record Information Background Check = \$32 (Each applicant, payable to live scan agency.)

The DOJ fee schedule does not include any additional fee that the licensing authority may charge for processing this application, pursuant to the Business and Professions Code or Financial Code, or for the service of taking fingerprints for the criminal offender record information background check. Payment to the DOJ must be made by check, cashier's check or money order.
NOTE: The fees are non-refundable. Cash will not be accepted for payment. Make remittance payable to "Department of Justice."

Should the applicant(s) be printed using the fingerprint hard card (FD 258) because the printing agency has an exemption to the Live Scan requirement, the fingerprint hard card(s), along with the required fees, payable to the DOJ, must be sent in with the application.



Zoning and Use Clearance Form

PC Permit Type (*Limit 1 per form*): Antique Shop P202

Address of Business: _____

City: _____ Zip Code: _____

Located between streets: _____

LADBS USE ONLY-- INSPECTOR TO ANSWER ALL ENTRIES BELOW

Zone: _____

LADBS Permit Type: _____

LADBS Permit No. : _____

Business shown ____ is ____ is not **A PERMITTED USE**

Business shown ____ is ____ is not **A PERMITTED USE BY THE OCCUPANCY RECORD**

**Applicant Note – Additional Building and Safety and/or Zoning requirements may be applicable and imposed.*

Is a Conditional Use Permit Required? Yes ____ No ____

CUP ZA No. _____ (*Please provide copy*)

Has the USE been vacated for greater than one year? Yes ____ No ____

Remarks:

LADBS Signature: _____

Place Stamp Here

LADBS Printed Name: _____

Date: _____

Contact No: _____

Building and Safety Locations: Open to the Public - Appointment only (www.ladbs.org)

Downtown Los Angeles: 201 N. Figueroa Street, First Floor, Los Angeles, 90012

Hours of Operation: Monday through Friday, 7:30 a.m. to 4:30 p.m.

Drop-Off/Pick-up Only

Van Nuys: 6262 Van Nuys Blvd #251, Van Nuys, 91401 Hours:
Monday, Tuesday, Thursday, Friday, 7:30 a.m. to 4:00 p.m.
Wednesday: 9:00 a.m. to 4:00 p.m.

West Los Angeles: 1828 Sawtelle Blvd, Los Angeles, 90025
Hours: Monday, Tuesday, Thursday, Friday, 7:30 a.m. to 4:00 p.m.
Wednesday: 9:00 a.m. to 4:00 p.m.

The Los Angeles Police Commission will not issue a permit for any business activity which is not allowed at a location by the Zoning Administration. Be advised that this form is only valid if signed, dated, stamped and all fields on the form are completely filled out by a representative of the Department of Building and Safety. All incomplete forms **will not** be accepted and will delay the application process.

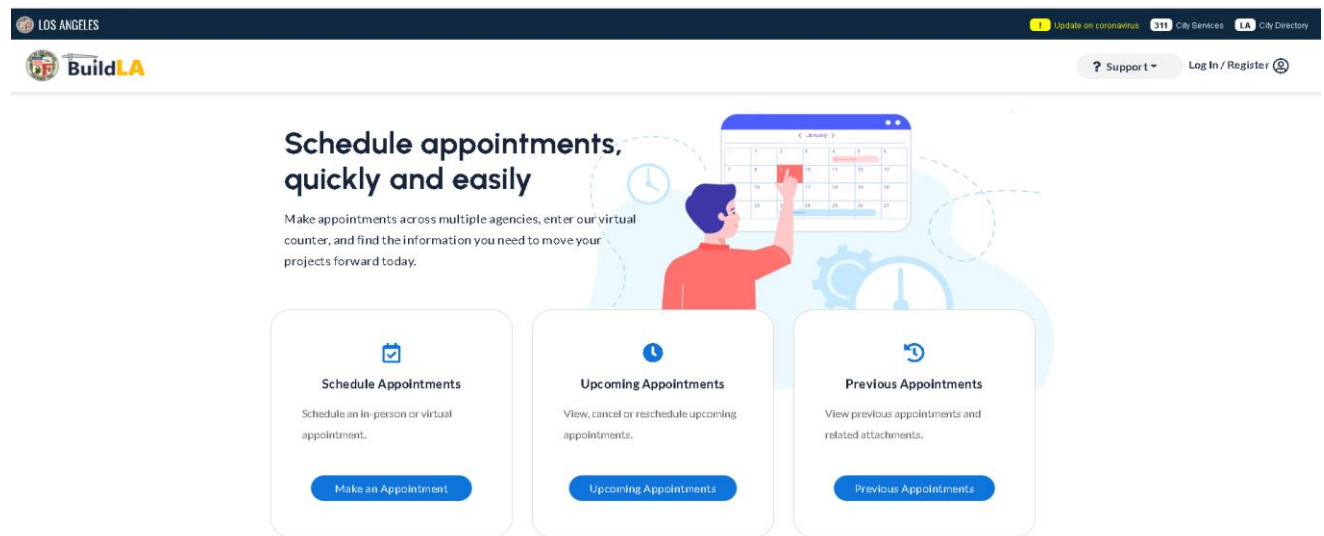
Zoning and Use Clearance Form Procedure

Please use the following steps to complete your Zoning and Use Clearance Form:

Step 1: Make a “New Submittal” appointment with LADBS, using the following BuildLA link:

<https://appointments.lacity.org/apptsys/Public/Account>

Step 2: Click “**Make an Appointment**” located in the “Schedule Appointment” Tab



Step 3: In the “Lets Get Started” dialog box make the following selections:

Agency/Department-**Building and Safety (LADBS)**

Select Service-**Building Plan Check – New plan check submittal**

Select Office- **LADBS – Metro (Downtown) 4th Floor**

Let's Get Started

Select Agency/Department

Select Service [Don't See your Service?](#)

Select Office

[< Back](#) [Next](#)

At your appointment time, LADBS will screen your request and documents and assign them to a LADBS engineer to review your request for approval. Additional documents may be requested.

Los Angeles Department of Building and Safety (LADBS) -201 N. Figueroa St., First Floor, Los Angeles 90012 Phone: 311 or (213) 473-3231



STATEMENT OF INAPPLICABILITY

State of California Secondhand Dealer License

Definition - Secondhand Dealer

A secondhand dealer includes any person, partnership, firm or corporation whose primary business is buying, selling, trading, receiving pawn, accepting for sale on consignment, or accepting for auctioning, second hand tangible personal property. Any person owning 10 percent or more of the stock in a corporation engaged in the secondhand dealer business is considered by California Department of Justice to be a secondhand dealer and must be fingerprinted and named in the application. Pawnbrokers are included in this definition and; for purposes of this law, are secondhand dealers.

The term 'secondhand dealer' also included and person who engages in the business of buying or selling secondhand tangible personal property in the regular course of business. Therefore, any type of business can be required to be licensed as a secondhand dealer. Examples of businesses which could be defined as secondhand dealers are photographic equipment and supply stores; and appliance, TV and radio repair outlets.

Definition -Tangible Personal Property

All tangible personal property, new or used, received in pledge as security for a loan by pawnbroker or secondhand dealer. All property bearing a serial number, personalized initials or inscription, at the time it is acquired by a secondhand dealer or pawnbroker, or which at the time of acquisition bears evidence of having had a serial number or personalized initials or inscription. All personal property commonly sold by secondhand dealers determined by the State Attorney General to be frequently stolen. The personal property items listed below have been determined by the State Attorney General to constitute a significant class of stolen goods:

1. Jewelry
2. Sterling Silver Utensils

I certify that the business for which the _____ Police permit is being applied for will not be a secondhand dealership as defined above.

PRINT NAME

TITLE

SIGN NAME

DATE

(Rev. 01/2018)



Designation of Qualified Manager

(I/We) _____
Permit Holder's/Permit Applicant's Full Legal Name

Doing Business As _____, designate the following _____ person(s)
Business Name (Doing Business As) number

Full Legal Name of Qualified Manager State Identification Number

Full Legal Name of Qualified Manager State Identification Number

as my/our Designated Manager, to represent (me/us) before the Los Angeles (Commission), Los Angeles Police Department, or any office or department of the City of Los Angeles with respect to (all) my police permit(s).

Said Designated Manager is authorized to receive information about all accounts related to police permits held by me/us including permit applications, history, status, disciplinary action, fees, payments taxes, and other information used by the City to transact business on police permits. Said Designated Manager is authorized to transact business in connection with police permits, including opening and closing accounts, applying for permits, canceling permits, giving oral and written information, and to perform any act or thing whatsoever concerning police permits in every aspect as (I/we) could do were (I/we) personally present. The Designated Manager has the authority to legally and financially bind the permit holder.

This Designation of Qualified Manager revokes all earlier Designation of Qualified Manager forms and shall be in full force and effect until written revocation is received by the Commission or until a new form is requested by the Commission and executed by me/us.

The undersigned permit holder(s)/applicant(s) further certifies that this Designation of Qualified Manager was completely filled in at the time of this execution.

I read, write, and understand English, or I have had the permit process and all documents, including this Designation of Qualified Manager form sufficiently explained to me.

Signed this _____ day of _____
Day Month Year Master Account Number

This form MUST BE NOTARIZED.

Permit Holder's/Applicant's Full Legal Name—Printed or Typed

The NOTARY FORM MUST STATE THE TITLE OF THIS DOCUMENT AS "Designation of Qualified Manager" or the form will not be accepted. Notary, see additional instructions below.

Permit Holder's/Applicant's Signature(s)

Notary must complete the information below:

Notary's street address: _____

Notary's city, state, and zip code: _____

Notary Public's Phone #: _____

Notary Public's email address (optional): _____

After receipt and review of the completed form, this Designation of Qualified Manager will be applied to all permit holder accounts. This form is to be utilized for the establishing of the Qualified Manager only, and the Qualified Manager is responsible for contacting the City to request any information or complete any transaction.



Affidavit of Property Owner - Consent to Operate

Complete this form **only** if your lease agreement does not indicate the usage. This form must be notarized or signed before a Deputy City Clerk. If providing a notary form, be sure the document is titled "Affidavit of Property Owner -Consent to Operate."

Type(s) of Permit(s) applying for:

Doing Business as (DBA): _____

Contact Phone No: _____ Business Phone No: _____

Secondhand Books Secondhand Jewelry

Type of Permit (select all that apply): Secondhand Gen Secondhand Auto Parts Pawn

Property Owner Information - Do Not Leave Anything Blank

Legal Name of Lessor: _____
(Must match lease)

Lessor Business Address: _____
(Must include: Apartment, Suite, Space, Unit numbers, etc.)

City: _____ Zip Code: _____

Lessor Mailing Address: _____
(If same as address above, write "same.")

City: _____ State: _____ Zip Code: _____

Contact Phone No: _____ Business Phone No: _____

For Notary Public Use Only

I, _____, being duly sworn, depose and say that I am the owner and/or authorized agent of the real property involved in the application and do hereby consent to the filing of a Police Permit Application and to the permitted activities. (Notarized Form attached)

Signature of Notary Public

Notary Public Stamp Here

State ID: _____

Date: _____

Signature of Property Owner: _____ Date: _____

Print Name: _____ Title: _____

Signature of Deputy City Clerk: _____ Date: _____

Print Name: _____

The following is an excerpt of the Los Angeles
Municipal Code outlining the City law regarding
Secondhand General police permits.

Section 103.301 Antique Shop

SEC. 103.301. ANTIQUE SHOPS.

(a) **Definitions.** As used in this article:

1. “**ANTIQUE SHOP**” means a shop where secondhand merchandise is sold at retail but where at least 90% measured according to value, of the used or secondhand merchandise on hand at any time consists of objects of art, bric-a-brac, curios, or household furniture or furnishings, offered for sale upon the basis, express or implied, that the value of the property, in whole or in substantial part, is derived from its age or from its historical association.

(b) **Permit Requirements.** The operator of any antique shop may, in lieu of the secondhand dealers’ permit required by Section 103.311, apply for and obtain a special permit to conduct an antique shop. Every application hereunder must be accompanied by an investigation fee of \$50.00. If the application is approved, an additional fee of \$25.00 shall be collected upon the issuance of the permit, except in those cases where the applicant has already paid the secondhand dealer’s permit fee for the same place of business. **(Amended by Ord. No. 114,879, Eff. 12/20/59.)**

(c) **Change of Location.** A change of location may be endorsed upon a permit hereunder upon written application by a permittee accompanied by a change of location fee as prescribed in Sec. 103.12.

(d) **Must Comply with Secondhand Dealers Regulations.** The holder of an antique shop permit shall obey all of the requirements of this article and the rules and regulations of the Board pertaining to the receipt, handling, disposal, and sale of secondhand merchandise generally, but shall be exempt from the hours of business limitations.