



# CARNIVALS

## *Section 103.104*

### 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](mailto: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 inform you of the final notice.

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#### PLEASE NOTE

- Obtain all other city permits as the police permit is the last stop. Other permits may include the Department of Building and Safety's Temporary Special Event (TSE) permit, Fire Marshall plot plan approval, park permit for usage, etc.
- The cost of processing applications for this permit is **\$137.00**, 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/0-0-0-191915#JD\\_103.104](https://codelibrary.amlegal.com/codes/los_angeles/latest/lamc/0-0-0-191915#JD_103.104).



# CARNIVALS

## Section 103.104

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Forms & Documents Needed To Complete Application		DONE	N/A
1	<b>Business Information - Face Sheet Form</b>		
2	<b>About My Event Form</b> ( <i>Complete form as it pertains to the business</i> )		
3	<b>Owners &amp; Applicants Form</b> ( <i>Ownership should equal 100%. If not, explain in the space provided</i> )		
4	<b>Personal Application Form</b> ( <i>Each owner must complete this form</i> ) - DO NOT SIGN UNTIL INSTRUCTED BY INVESTIGATOR OR NOTARIZED		
5	<b>Copy of the applicant's valid state Driver's License or state identification</b> - The address must match the applicant's information on the Personal Application - Shall not be expired		
6	<b>Completed Live Scan Form</b> - Only one required per year, to be submitted with first application of the year - If residing in California, go to any Live Scan location: <a href="https://oag.ca.gov/fingerprints/locations?county=Los%20Angeles">https://oag.ca.gov/fingerprints/locations?county=Los%20Angeles</a> - 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		
7	<b>Temporary Special Event</b> - The Department of Building and Safety (LADBS) will determine whether or not this permit is needed. If it does not apply to you, please instruct your LADBS investigator to email your Police Commission investigator to let me them know. Applications are accepted online at: <a href="https://www.ladbs.org/services/core-services/plan-check-permit/types-of-plan-checks-permits/special-event-permit">https://www.ladbs.org/services/core-services/plan-check-permit/types-of-plan-checks-permits/special-event-permit</a>		
8	<b>Consultant Authorization Letter</b> (if applicable) -To be submitted with first application of the year		
9	<b>Fire Sign-Off</b> -Create your own plot plan including exits and surrounding streets then obtain approval from Fire		
10	<b>Copy of all Relevant Contracts</b> - Examples include insurance, venue, security, service agreements, etc.		
11	<b>Publication Proofs</b> ( <i>See page 9 for instructions</i> )		
12	<b>Entity Checklist</b> -Refer to page 3 to review which documents are applicable to your application		



# CARNIVALS

## *Section 103.104*

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
<b>Sole Proprietorship</b>	
<b>Partnership</b> - A Partnership agreement naming all partners; <b>or</b> - Certificate of Limited Partnership for limited partners certified by the Secretary of State	
<b>Limited Liability Companies (LLC)</b> - Articles of Organization - Operating Agreement (Identifying all members) - Fictitious name statement (certified by the State) - All members must apply	
<b>Corporation (C-Corp, S-Corp and Professional Corp)</b> - Corporate Resolution or Meeting Minutes (Identifying officers and signed by Corporate Secretary) - Articles of Incorporation (Certified by the State of CA); if out of State, submit equivalent - Copy of Stock Certificates - All officers and all persons owning a controlling interest in a non publicly traded corporation	

***\*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

Type of Permit: _____	CARNIVALS
PC Account No: _____	
PC File No: _____	
Grant Date: _____	CID Staff Stamp Here
LAPD Area: _____	
RD No: _____ Council District No: _____	

### 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: \_\_\_\_\_



# About My Event

Account No: \_\_\_\_\_

*Be advised the details furnished on this form will be used in conjunction with the Police Commission inspection to ensure compliance during the inspection. If any part of the information below is changed, resubmit this form by email to [pcpermitapplications@lapd.online](mailto:pcpermitapplications@lapd.online)*

### Complete All Fields - Do Not Leave Anything Blank

Doing Business as (DBA): \_\_\_\_\_

Business Address: \_\_\_\_\_

### Business Information and Details

Adult Charity

Adult Commercial

Name of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Has this organization held prior events in L.A.?(yes/no): \_\_\_\_\_ Any Arrests? (yes/no): \_\_\_\_\_

Date of Last Event: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Contact Phone No: \_\_\_\_\_

Number and Names of Games: \_\_\_\_\_

**Date of Event:** \_\_\_\_\_ **Time Event Starts:** \_\_\_\_\_ **Time Event Ends:** \_\_\_\_\_

TSE Permit Number: \_\_\_\_\_

### **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.

I further declare to remain in compliance with all laws and rules as defined by the Los Angeles Municipal Code, Chapter X. Failure to comply may result in disciplinary action and a filing by the City Attorney and the District Attorney. I sign this on my behalf or on the behalf the business, with full authority to do so.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_



# 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  
Height: 6 Weight: 7 Agency Billing Number  
Eye Color: 8 Hair Color: 9 Misc No: \_\_\_\_\_  
Place of Birth: 10 Home Address: 11a  
11b Street or P.O. Box  
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)  
Employer Name **\*\*\*DO NOT USE THIS SECTION\*\*\***  
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)





# Publication Information

*The permit you are applying for requires publication in a newspaper local to the area where you will be operating. Use the instructions below to complete this requirement.*

## Applicant Instructions

1. Fill out the example form below, the public notice should be published accordingly.
2. Use an English newspaper with general circulation in the area of your business. Note that newspapers covering a smaller area are generally less expensive and some newspapers publish once a week. Plan ahead to minimize the cost of your publication.
3. Publish the notice and present proofs with to complete your application.
  - a. The notice should be published twice, at least 5 days apart.
  - b. The first printing cannot be before your in-person appointment.
  - c. The last printing must be 10 days or less from the day you file the application.

## Example Publishing Timeline

<b>Application appointment date:</b>	January	1st
<b>First day notice can print:</b>	January	1st
<b>Days last notice can print:</b>	January 5th - January 22nd	

## NOTICE OF APPLICATION FOR POLICE PERMIT

Notice is hereby given that application has been made to the Board of Police Commissioners for a permit to conduct a:

ENTITY NAME: \_\_\_\_\_  
[Type of Business]

DOING BUSINESS AS: \_\_\_\_\_

LOCATED AT: \_\_\_\_\_

Any person desiring to protest the issuance of this permit shall make a written protest before \_\_\_\_\_ to the  
[Date]

LOS ANGELES POLICE COMMISSION  
100 West First Street  
Los Angeles, CA 90012

Upon receipt of written protests, protesting persons will be notified of date, time, and place for hearing.

BOARD OF POLICE COMMISSIONERS



## THE LOS ANGELES FIRE DEPARTMENT

# FIRE DEVELOPMENT SERVICES, PLAN-REVIEW AND INSPECTION FEES

EFFECTIVE July 21, 2022

FIRE DEPARTMENT SECTION 118, PLAN-CHECK AND INSPECTION FEES

TYPE OF SERVICE	FEE RATE	COMMENTS
Fire/Life Safety Plan Review	The greater of 0.111% of project valuation or \$1,011	Paid before plan review services are rendered
Inspection and Re-Inspection	\$337 per hour	Paid before certifications of occupancy are signed-off
Off-Hours Inspection	\$480 (4 hours minimum) and \$120 per hour, or any portion of one hour, thereafter plus (+) \$337 per hour for inspection and re-inspection.	Paid before certificates of occupancy are signed-off
Expedite and Additional Expedite Plan Review	\$480 flat-rate fee (4 hours minimum) and \$120 per hour, or any portion of one hour, thereafter plus (+) the greater of 0.111% of project valuation or \$1,011	The flat rate fee of \$480 is paid before services are provided. Additional Expedite hours will be billed.
Fire Code Review	\$337 per hour	First hour is paid before services are rendered