

Secondhand (General)

Section 103.311

STEPS FOR OBTAINING A PERMIT

- **1. Submission:** Applications will not be accepted by mail. Please send your completed application documents by email to peremitapplications@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

- o 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 \$491.00, subject to change.
- o 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.
- o 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 <u>NOT</u> 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



Secondhand (General)

Section 103.311

| Business Name: | | |
|-------------------|--|--|
| | | |
| Business Address: | | |

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



Secondhand (General)

Section 103.311

| В | usiness Name: | |
|---|--|-------------------|
| В | usiness Address: | |
| | * Your business must be registered in California to do business in | n this state. |
| | Additional Forms Needed To Complete Application Per Business Entity Type | Select Applicable |
| | Sole Proprietorship | |
| | Partnership - A Partnership agreement naming all partners; or - Certificate of Limited Partnership for limited partners certified by the Secretary of State | |
| | Limited Liability Companies (LLC) - Articles of Organization - Operating Agreement (Identifying all members) - Fictitious name statement (certified by the State) - All members must apply | |
| | Corporation (C-Corp, S-Corp and Professional Corp) - Corporate Resolution or Meeting Minutes (Identifying officers and signed by Corporate Secretary) | |

*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.

- Articles of Incorporation (Certified by the State of CA); if out of State, submit equivalent

- All officers and all persons owning a controlling interest in a non publicly traded

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- Copy of Stock Certificates

corporation



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: SECONDHAND (GENERAL) PC Account 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: _____ 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") 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): Percent of Name Title Ownership (All Required Applicants) (President, CEO, CFO, Secretary, etc.) 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.

| Name of Applicant: Home Address: | Zip Code: | |
|---|--|---|
| | Zip Code: | |
| (Must include: Anartment, Suita Space, Unit numbers, etc.) | Zip Code: | |
| City: | | |
| Contact Phone No: Business Phone No: | | |
| Email Address: | | |
| DOB: Driver's License/ID: | | State: |
| Gender: Height: Weight: Hair Color: | Eye C | Color: |
| Applicant History - Do Not Leave Anything Blank | | |
| If married, will your spouse be involved with the business? (If you answered yes and are applying as a sole proprietor or partnership, your spouse must apply | | No |
| 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. | | |
| AD CAREFULLY BEFORE SIGNING clare under the penalty of perjury and under the law of the State of California, all information contaplemental documents is true and correct. I understand that all information provided and statements e statements may be grounds for denial or revocation of permits issued by the Los Angeles Police (applicants not present to sign must have this application form NOTARIZED. The notativide the proper Acknowledgement/Jurat. The document must be titled "Application for DO NOT SIGN UNTIL INSTRUCTED TO DO SO - Must be witnessed by a Deputy City plicant's Signature: | made are subject to in Commission. Any shall stamp and Police Permit" or a style of the Commission of | vestigations and any sign this form or it will not be accepted by a Notary Public |
| nt Name: tness Signature: Print Name: | | Date: |

REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

| ***FOLLOW INSTR | RUCTIONS BELOW*** | | |
|--------------------------------------|---------------------------------------|---------------|---|
| ORI: CA0194200 | Type of Application: | LICENSE O | CERT OR PERMIT |
| Job Title or Type of License, Certif | ication or Permit: ******* | ****** | POLICE COMMISSION PERMIT |
| A A dda-s- C-4 Ct-ilti- | A | | |
| Agency Address Set Contribution | | 14022 | I ADD has many and as I lee this |
| Agency authorized to receiv | e criminal history information | | LAPD has many codes. Use this. ode (five digit code assigned by DOJ) |
| 700 E. TEMPLE ST. | · · · · · · · · · · · · · · · · · · · | Man Co | oue (five digit code assigned by DO3) |
| Street No. Street or P.O | | Contact | t Name (Mandatory for all school submissions) |
| LOS ANGELES CA | 91351 | | 996-1210 |
| City State | z Zip Code | Contact | t Telephone No. |
| ***ENTER INFORM | IATION FOR 1 – 11b*** | Live Scan Ope | erator: Be sure to enter all items. |
| Name of Applicant: 1 | | | |
| (please print) Last | First | | MI |
| <u> </u> | | | <u>_</u> |
| Alias: 2 | <u>_</u> | Driver' | s License No. 3 |
| Last | First 5 | | |
| Date of Birth: 4 | Sex: Male Fen | nale Misc. N | No. BIL- N/A |
| XX * 1. | w 1 | Mr. N | Agency Billing Number |
| Height: 6 | Weight: 7 | Misc N | |
| Eye Color: 8 | Hair Color: 9 | Home A | Address: 11a |
| Di CD' d | | | Street or P.O. Box |
| Place of Birth: 10 | | | 11b |
| SOC: ***DO NOT ENTER | SOCIAL SECURITY*** | | City, State and Zip Code |
| | | | |
| ***MAKE TWO CO | PIES. GO TO LIVE SCAN | CENTER.** | * |
| Your Number: TRC# | | Level of S | Service X DOJ FBI |
| | gency Identifying No.) | Level of s | Service X DOJ FBI |
| OCA No. (Ag | gency identifying No.) | | |
| If resubmission, list Original A | ГІ No. | | |
| | | | |
| Employer: (Additional response | for agencies specified by statute) | | |
| Zimproyer: (ricatrional response | for agencies specified by statute, | *** | DO NOT USE THIS SECTION*** |
| Employer Name | | | |
| | | | |
| Street No. | Street or P.O. Box | Mai | l Code (five digit code assigned by DOJ) |
| | | (|) |
| City State | Zip Code | | Agency Telephone No. (optional) |
| | - | | - |
| Live Scan Transaction Complet | ed Bv: | | Date: |
| | Name of Operator | | <u> </u> |
| | | | |
| Transmitting Agency | ATI No |). | Amount Collected/Billed |
| LAPD 02/2016 | | | |
| GIVE COPIES OF FOR | M· | | |

SECOND COPY-SEND TO LAPD;

THIRD COPY-Keep

DATE



SIGNATURE

APPLICATION FOR SECONDHAND DEALER OR PAWNBROKER LICENSE

| A. Type of Application (Check the appropriate | e box): | | | |
|---|---|--|-----------------|---|
| Application for Secondhand Dealer License (| - | | | DOJ USE ONLY |
| Application for Pawnbroker License (21300 F | • | | Rec | eived: |
| Application for Renewal: | | | | |
| Secondhand Dealer License (21642 B&F |) State License No.: _ | | | ck # |
| Pawnbroker License (21301 FC) State L | icense No.: | | Che | ck Amt: |
| ☐ Modifications (change of business, name, ad | dress, etc.) | | | |
| B. Licensing Agency Information: (Completed | by licensing agency on | ly.) | | |
| | | | | |
| Licensing Agency (Substation if applicable) | | | | Date |
| Mailing Address | | | | |
| Licensing Official (Name, Title) | | | | Phone |
| THE FOLLOWING SE | CTIONS ARE TO BE | COMPLETED BY THE | APPLICAN1 | |
| C. Business Owner(s): (Name of individual, p | | | | |
| Name | Date of Birth | Title | | Phone |
| Name | Date of Birth | Title | | Phone |
| Name ATTACH ADDITIONAL SHE | Date of Birth | Title | | Phone |
| D. Business Information | LITI NECESSART. OF | ILON OINCLE II ADDITIO | VAL OFFICE I | J GOLD (|
| D. Dusiness information | | | | |
| Business Name | | | | Phone |
| Street Address | | City | | Zip Code |
| Business Ownership: Individual P | | poration orporate name differs from bu | siness name, o | complete the following): |
| Corporation Name | | | | Phone |
| Street Address | | City | | Zip Code |
| E. Off-Site Storage Location: Will property belonging to the business be sto | red off the business | premises? | ☐ No | *If " yes ," please provide the information below: |
| Off-Site Storage Street Address | | City | | Zip Code |
| F. Multiple Secondhand Dealer or Pawnbroke Do any parties to this application have a financi | | er Secondhand Dealer o | r Pawnbroke | er Business in California? |
| | | , Address, City, and State al sheet of paper, and che | | |
| G. Additional Information: | | | | |
| Have any parties to this application ever been of | convicted of an attem | pt to receive stolen prop | erty or any o | other property-related crime? |
| | de the applicant's nam heck circle if additional | e, date, and details on the sheet is used | arrest or con | viction on an additional |
| H. Certification: "As the person responsible for completing the appliapplication is true and complete to the best of my k | | , I certify under penalty of | perjury that ti | he information on this |

TITLE

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 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): | SECONDHAND GENERAL | P-273 |
|---|--|-----------------------|
| Address of Business: | | |
| City: | Zip Code | e: |
| Located between streets: | | |
| LADBS USE ONLY INSPE | CTOR TO ANSWER ALL ENTRIES I | BELOW |
| Zone: | | |
| LADBS Permit Type: LADBS Permit No.: | | |
| Business shown is is not A PERM | IITTED USE | |
| Business shown is is not A PERM | MITTED USE BY THE OCCUPANC | Y RECORD |
| *Applicant Note – Additional Building and Safet | ty and/or Zoning requirements may be app | plicable and imposed. |
| Is a Conditional Use Permit Required? | , | Yes No |
| CUP ZA No. | (Please provide copy) | |
| Has the USE been vacated for greater than on | | Yes No |
| Remarks: | | |
| | | |
| | | |
| | | |
| LADBS Signature: | Place | e Stamp Here |
| LADBS Printed Name: | | |
| Date: | | |
| Contact No: | | |
| Building and Safety Locations: | Open to the Public - Appointment only (www. ladl | os.org) |
| Downtown Los Angeles: 201 N. Figueroa Street, First Floor, I Hours of Operation: Monday through Friday, 7:30 a.m. to 4:3 | - | |
| Van Nuys: 6262 Van Nuys Blvd #251, Van Nuys, 91401 Ho | | |

Revised 03/23 Page 10 CID/PPS Reviewer's Initials _____

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

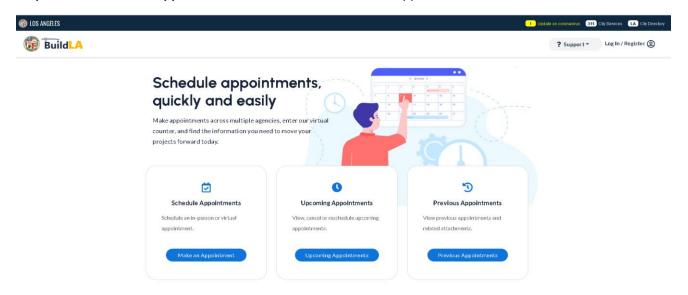
Department of Building and Safety. All incomplete forms will not be accepted and will delay the application process.

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

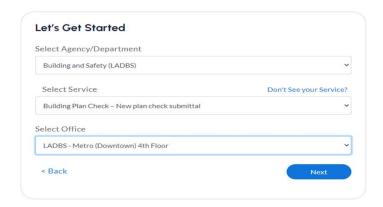


Step 3: In the "Lets Get Started" dialog box make the following selections:

Agency/Department-Building and Safety (LADBS)

Select Service-Building Plan Check - New plan check submittal

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



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 on Types of Goods Sold

| pplicant's Signature: | Date: |
|-----------------------|-------|
| | |
| rint Name: | |

TO TO THE TOTAL TO

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 a&epting 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

(Rev. 01/2018)

2. Sterling Silver Utensils

| I certify | that the | e bu | siness | for which | the | | Police | permit | is being | |
|-----------|----------|------|--------|-----------|------------|------------|--------|--------|----------|--|
| applied | for will | not | be a s | econdhand | dealership | as defined | above. | | | |
| | | | | | | | | | | |
| PRINT N | NAME | | | | | | TITLE | | | |
| SIGN N | AME | | | | | | DATE | | | |



Designation of Qualified Manager

| Doing Business As Business Name (Doing Business As) | (I/We) | |
|--|--|--|
| Full Legal Name of Qualified Manager Full Legal Name of Qualified Manager State Identification Number State Identification Number State Identification Number 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 permits (all) my | Permit Holder's/Permit Applicant's Full Legal Name | |
| Full Legal Name of Qualified Manager Full Legal Name of Qualified Manager State Identification Number State Identification Number State Identification Number 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 permits (all) my | Doing Business As | _, designate the following person(s) |
| 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 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 | Business Name (Doing Business As) | 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 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 | Full Legal Name of Qualified Manager | State Identification Number |
| 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 cosing accounts, applying for permits, capplying for permits, designated Manager permits, and to perform any act or thing whatsoever concerning police permits in every aspect as (I/we) could do were (I/we) 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) 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) permits, and written information is received by the Commission 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 | Full Legal Name of Qualified Manager | State Identification Number |
| 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 | | , Los Angeles Police Department, or any office or department of |
| 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 | history, status, disciplinary action, fees, payments taxes, and other information used by the Manager is authorized to transact business in connection with police permits, including ope permits, giving oral and written information, and to perform any act or thing whatsoever co we) personally present. The Designated Manager has the authority to legally and financially. This Designation of Qualified Manager revokes all earlier Designation of Qualified Manager. | City to transact business on police permits. Said Designated ning and closing accounts, applying for permits, canceling neerning police permits in every aspect as (I/we) could do were (I/v bind the permit holder. |
| Signed this | The undersigned permit holder(s)/applicant(s) further certifies that this Designation of Qual | • |
| 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: Notary must complete the information below: | explained to me. | ncluding this Designation of Qualified Manager form sufficiently |
| 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: Notary must complete the information below: | Signed this day of Month Year | Master Account Number |
| 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: Notary must complete the information below: | | |
| 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: | | This folil WOST BE NOTARIZED. |
| Notary must complete the information below: | Permit Holder's/Applicant's Full Legal Name—Printed or Typed | TITLE OF THIS DOCUMENT AS "Designation |
| | Permit Holder's/Applicant's Signature(s) | |
| Notary's street address: | Notary must complete the information below: | |
| | Notary's street address: | |
| Notary's city, state, and zip code: | Notary's city, state, and zip code: | |
| Notary Public's Phone #: | Notary Public's Phone #: | |
| Notary Public's email address (optional): | 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 <u>only</u> 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: | ie: Apartment, Suite, Space, Unit numbers, etc.) |
| City: | Zip Code: |
| Lessor Mailing Address: | ddress above, write "same.") |
| | 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 | he application and do hereby consent to the filing of a Police Permit |
| Application and to the permitted activities. (Notari | ized 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. 311 Secondhand Dealers

SEC. 103.311. SECONDHAND DEALERS.

- (a) **Definitions**. As used in this article:
 - 1. "SECONDHAND DEALER" means a person engaging in, conducting, managing, or carrying on the business of buying, selling, or otherwise dealing in secondhand or rebuilt or reconditioned goods, wares and merchandise. The term does not include secondhand dealer-jewelry, or persons holding permits as auto wreckers or used car dealers or secondhand book dealers. The acceptance, sale or disposal of used automobile tires or automobile batteries taken in part payment for new tires or batteries shall not be deemed to constitute the doing of the business of a secondhand dealer.
 - 2. "SECONDHAND DEALER JEWELRY" means a person engaging in, conducting, managing or carrying on the business of buying, selling, or otherwise dealing in secondhand jewelry, precious and semi-precious stones and metals and imitations thereof, watches, rings, bracelets, and other similar goods, wares and merchandise.
- (b) **Permit Required**. No person shall engage in, manage, conduct or carry on the business of a secondhand dealer or a secondhand dealer-jewelry without a written permit from the Board.
- (c) **Change of Location**. A change of location may be endorsed on a permit by the Board upon written application by the permittee accompanied by the change of location fee prescribed in Section 103.12.
- (d) **Permittee, Responsible for Conduct of Premises**. It shall be the duty of permittee to see that no secondhand goods are sold or purchased by his agent or any other person in or upon the permittee's premises or location other than in the course of permittee's business.
- (e) **Advertising Restrictions**. No permittee shall advertise any goods for sale when such goods are not actually for sale at the premises at the time the advertisement is inserted in the newspaper or medium.

Within 24 hours after the sale of any goods that have been advertised for sale, the permittee shall withdraw or cancel any advertisement relative to such goods.

- (f) **Hold-Order**. A police officer may place a hold-order upon property acquired by the permittee in the course of his business, for a period of 90 days, and upon release of such property, may require the permittee to keep a record of the disposition of such property. It shall be unlawful for any person to dispose of any property contrary to any hold-order issued by a police officer.
- (g) **Holding Period**. Property acquired in the course of permittee's business shall be reported and held for such period of time as is fixed by rule and regulation of the Board.
- (h) **Violation**. No permittee shall clean, alter, repair or otherwise change the appearance, melt, destroy, sell, export or otherwise dispose of any article, goods, wares, merchandise, waste materials, junk or things obtained in the course of his business until such articles have been held for the period required by the Board.
- (i) **Exemption.** (Added by Ord. No. 158,621, Eff. 2/20/84.) Any person engaging in, conducting, managing, selling, exchanging, displaying or offering for sale or exchange, secondhand personal property at a swap meet is exempt from Subsections (a) through (h), inclusive, of this section, and any rules and regulations promulgated by the Board pursuant to said subsections, but is subject to the following provisions and conditions:
 - 1. **Definitions**. As used in this subsection:
 - a. "Swap Meet" means any event where secondhand goods are offered or displayed for sale or exchange and
 - (1) A fee is charged for the privilege of offering or displaying secondhand goods for sale or exchange; or
 - (2) A fee is charged to prospective buyers for admission to the area where secondhand goods are offered or displayed for sale or exchange.
 - b. "Swap Meet Operator" means any individual, partnership, corporation, business association or other person or entity which sponsors, controls, manages or otherwise conducts a swap meet.
 - c. "Swap Meet Vendor" means any individual, partnership, corporation, business association or other person or entity which sells, exchanges, displays, or offers for sale or exchange, any secondhand goods at a swap meet.
 - 2. **Permit Required**. No person or entity shall operate a swap meet without a written permit from the Board, except that a permit shall not be required for any event sponsored by and for the exclusive benefit of any community chest, fund, foundation, association or corporation organized and operated solely for religious or charitable purposes provided that no portion of any admission fee charged swap meet vendors or prospective purchasers, or the receipts from the sale or exchange of new or secondhand goods, inures to the benefit of any shareholder, officer, employee, person or entity organizing, sponsoring or conducting such event.

- a. No permit shall be issued which will permit the sale or display of firearms, flammables, and hash pipes or other manipulative instruments relating to the use or consumption of drugs or their derivatives.
 - b. No permit shall be issued unless the swap meet operator has first obtained a business tax registration certificate.
- c. No permit shall be issued for a swap meet requiring a conditional use pursuant to Section 12.24 of this Code until such conditional use has been obtained.
- d. When the Board has determined that the cost of police investigation services will be increased because of the operation of a swap meet, the Board may require the swap meet operator to make payment into the general fund of the City of Los Angeles an amount calculated at the current hourly rate of a Detective II for each hour of investigation on a weekday and 150% of the current hourly rate of a Detective II for each hour of investigation on a Saturday, Sunday or holiday involving the swap meet, or up to a maximum of 16 hours per day of swap meet operation, plus 23.1% of such amount for administrative costs. The swap meet operator shall pay the amount due to the Office of Finance within 30 days after the bill is mailed to the swap meet operator by the Board. (Amended by Ord. No. 173,300, Eff. 6/30/00, Oper. 7/1/00.)
- e. A permit shall be issued, denied or revoked pursuant to the provisions of this chapter; however, the Board shall place no other conditions on the operation of a swap meet permitted pursuant to Section 12.24 of this Code other than those permitted by this subsection.
- f. Each swap meet operator, prior to each swap meet, shall verify to the Police Department that each swap meet vendor has consented to an inspection by a police officer of all goods under such vendor's control at the swap meet before permitting such vendor to participate in the swap meet. Failure on the part of the swap meet operator to verify the above information is grounds for the Police Department to close the swap meet. (Added by Ord. No. 161,524, Eff. 8/17/86.)