



SAN DIEGO COUNTY SHERIFF'S OFFICE
LICENSING DIVISION

9621 Ridgehaven Court, PO Box 939062
San Diego, CA 92193-9062



BACKGROUND APPLICATION FOR SHERIFF'S REGULATORY ACTIVITIES

- 1. Photo identification (i.e. California Driver License)
2. Release & Waiver Form
3. If not born in U.S., submit Permanent Residence status, I-94, or U.S Passport
4. Fingerprint fee \$49.00 (if applying as an Initial applicant)

File # \_\_\_\_\_

Please PRINT legibly

Type of business or activity for which you are applying \_\_\_\_\_

Affiliation with business or title (check one) [ ] Owner [ ] Manager [ ] Officer [ ] Partner [ ] Other

Name \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_
Last Name First Name Middle Name Cell Phone

All other names used (Past and present. Include maiden name) \_\_\_\_\_

\_\_\_\_\_ Gender: Male [ ] Female [ ]
Date of Birth Place of Birth

\_\_\_\_\_
Height Weight Hair Color Eye Color Driver License Number Social Security Number

E-Mail Address: \_\_\_\_\_

Residence Address: \_\_\_\_\_
Number Street City State Zip

Have you applied for a similar regulatory license in any other jurisdiction in the past (5) five years? [ ] YES [ ] NO

If yes, where? \_\_\_\_\_

List all charges within the past 10 years (misdemeanors & felonies) resulting in conviction or plea of nolo contendere:

Table with 4 columns: Date, Charge, Investigating Agency, Disposition

I hereby certify under penalty of perjury that the statements made in this application are true and correct to the best of my knowledge and belief. I understand that any false statements or information are grounds for denial of this application. I agree to have all the required notices, unless otherwise specified, sent by U.S. mail to the address given on the application. The right of reasonable inspection shall be a condition for issuance of this license.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Application Accepted By \_\_\_\_\_ Date \_\_\_\_\_
Licensing Staff



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### AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

Subject Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

As an applicant for a business permit/license from the San Diego Sheriff's Office, I am required to furnish information for use in determining my qualifications. In this connection, I authorize the disclosure and release of any and all truthful information that you may have with regards to myself, including, but not limited to, employment records, personnel files, background investigation files, disciplinary records, complaints, or grievances filed by or against me, training files, arrest, criminal, probation and driving records, military, academic or other records.

I direct you to release this information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the San Diego County Sheriff's Office.

I understand I will not receive and am not entitled to know the contents of confidential reports received and I further understand that these reports are privileged. (Gov. Code 6254 (f))

I hereby release you, your organization, their agents and representatives, and any person furnishing information, from any and all liability and/or damage that may result from furnishing the above information. A photocopy of this release is to be considered as valid as an original. This release will expire one (1) year after the date signed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full Name (Printed): \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_