



# SAN DIEGO COUNTY SHERIFF'S DEPARTMENT

## LICENSING DIVISION

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



### BINGO – MISCELLANEOUS INFORMATION

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

Please PRINT legibly

Full Name \_\_\_\_\_  
Last Name First Name Middle Name

Any other name used, aliases past and present (include maiden name) \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_ Alien Registration Number \_\_\_\_\_ U.S. Citizen? Yes / No

Gender \_\_\_\_\_ California Driver's License \_\_\_\_\_ Social Security \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_

Residence Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

<u>Date</u>	<u>Charge</u>	<u>Investigating Agency</u>	<u>Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

#### TO BE COMPLETED BY MANAGER

Applicant authorized for: \_\_\_\_\_ Bingo Assistant \_\_\_\_\_ Staff Member

Signature of Bingo Manager \_\_\_\_\_ Date \_\_\_\_\_

*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 \_\_\_\_\_

Accepted By (Licensing Staff) \_\_\_\_\_ Date \_\_\_\_\_