

SAN DIEGO COUNTY SHERIFF'S DEPARTMENT

LICENSING DIVISION

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



APPLICATION TO OPERATE A SWAP MEET

FEES:	NEW \$400	RENEWA	L \$370	PER STALL	\$24	FILE# SW
FEES A	ARE NOT RI	EFUNDABL	<u>e</u> - <u>totai</u>	L FEES MUST	EXCEED \$500	
*****	*****	*****	******	******	*****	*****
YOU M					YOUR APPLICATION:	
1.	Photo identi	fication (i.e.,	California l	Driver's Licens	e)	
2.						
3.				ent of Planning		
4.				activity will oc		
5.					r	
		property when	e activity v	will occur.		
6.	Plot Plan sh					
		cation of prop				
					of land, buildings or res	idences within 700 feet of the
		erior boundar				
						ritten agreement signed by the
				of the premises		
7.			` •	and dated form)		
8.	Other					
	(Last) OTHER NAM e Maiden:			(First)	(Middle)	
DATE OF BIRTH			PLACE OF BIRTH			
SEX_	НЕ	ZIGHT	W	VEIGHT	HAIR	EYES
DRIVE	ER'S LICENS	SE NO:				
RESID	ENCE					
	(Nu	ımber)	(Street)		(City)	(Zip)
*****	*****	*******	******	*****	*****	*******
LIST A	LL CHARGE	ES RESULTII	NG IN CO	NVICTION OF	R PLEA OF NOLO CON	NTENDERE:
	<u>CHARGE</u>		INVESTIGATING AGEN			Y <u>DISPOSITION</u>
<u>DATE</u>	<u>CH</u>	HARGE		<u>INVE</u>	STIGATING AGENCY	<u>DISPOSITION</u>
<u>DATE</u>	<u>CI</u>	<u>HARGE</u>		INVE	STIGATING AGENCY	<u>DISPOSITION</u>
<u>OATE</u>	<u>CF</u>	<u>IARGE</u>		INVE	STIGATING AGENCY	<u>DISPOSITION</u>
<u>ATE</u>	<u>C</u>	HARGE		INVE	STIGATING AGENCY	<u>DISPOSITION</u>



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SWAP MEET APPLICATION – PAGE 2

BUSINESS NAME		PHONE			
ADDRESS					
ADDRESS (Number) (Street)	(City)	(Zip)			
NAME OF PROPERTY OWNER					
NUMBER OF STALLS TO BE OPERATED		STATE TAX PERMIT#			
ARE YOU THE SOLE OWNER OF THIS BUSI If not, a Miscellaneous Information Form must b	NESS? e completed l	oy all partners and/	or business associates.		
**************************************	T THE INFOR F. I AGREE 1 O THE ADDRI N DIEGO CO	MATION I HAVE G TO HAVING ALL RE ESS GIVEN ON THE UNTY CODE OF RE	EIVEN IS TRUE AND CORRECT EQUIRED NOTICES, UNLESS E APPLICATION. I HAVE REAL EGULATORY ORDINANCES		
Applicant's signature	Date:				
Application accepted by	Date:				
**********	*******	******	*****		
THIS SECTION IS FOR OFFICE USE ONLY:					
LOCAL FIRE DEPARTMENT/MARSHALL APPROVED DISAPPROVED REASON			DISAPPROVED		
BYDATE		BY	DATE		
TITLE:FIRE PROTECTION DISTRICT:	-				
SHERIFF'S STATION: APPROVED DISAPPROVED REASON	_	SHERIFF'S LICENSING APPROVED DISAPPROVED REASON			
BY DATE	_	BY	DATE		