



ANNUAL PRIVATE SECURITY COMPANY
PERMIT AND BUSINESS LICENSE
TAX APPLICATION/RENEWAL

To renew or apply for your Private Security Company Permit you must complete and submit all forms listed below with payment of \$15.00 permit application fee and the total business license tax due.

If this is a renewal, the total amount due for business tax and permit fee is on line 10(ten) of your "Business License Tax Due – Renewal" Form.

Required Documents:

1. Business License Application Form (for new applications)
OR Business License Tax Due Renewal Form (for renewals)
2. Private Security Company Permit Application Form
3. Police Clearance Individual Information Form

NOTE: This form must be submitted for **each** Corporate Officer or Owner (including the person(s) who will have Active Operation and Management of the Business). You may photocopy this form or pick up additional copies in our office.

If you have any questions, call (209) 937-8313. Office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday. We are closed every other Friday. Visit www.stocktongov.com for a list of closed days and holidays.

FOR OFFICE USE ONLY		
<input type="checkbox"/> New	<input type="checkbox"/> Renewal	
Bus License _____	Control _____	
P# _____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____ Reviewing Officer Signature	_____ Badge #	_____ Date



CITY OF STOCKTON
PRIVATE SECURITY COMPANY
PERMIT APPLICATION

Application is herewith made for a permit to engage in the business of operating a PRIVATE SECURITY COMPANY in accordance with the provisions of division 6, Chapter 5, of the Stockton Municipal Code, and presenting the following:

1. Business Name (dba) _____

2. Mailing Address _____ City _____ State _____ Zip _____

3. Business Owner(s) _____

4. Address of Principal Place of Business _____

5. Territory Business Proposes to Operate _____

6. Hours Business Proposes to Patrol or Render Guard Service _____

7. Address of Branch Office(s) _____

8. Does Applicant Hold License from the State of California? No Yes, Date Issued _____

Has Application for Such License Ever Been Denied? No Yes, Date Denied _____

9. Name and Address of Surety or Sureties _____

10. Name and Address of Person(s) Who Will Have Active Operation and Management of the Business _____

11. If applicant is a Corporation: State the true names and complete residence address of the corporate officers, and submit a certified copy of the Resolution or Minutes authorizing this application.

Chief Executive Officer: Name _____

Address _____

Secretary: Name _____

Address _____

Chief Financial Officer: Name _____

Address _____

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

 SIGNATURE OF APPLICANT Signed on (Date) _____, in (City) _____, (State) _____

 SIGNATURE OF APPLICANT Signed on (Date) _____, in (City) _____, (State) _____

