



TOWN OF PARADISE POLICE DEPARTMENT

5595 Black Olive Drive, Paradise, CA 95969 • 24-Hour (530) 872-6241 • General (530) 872-6161 • FAX (530) 872-4950

INSTRUCTIONS TO APPLICANT

Firearms Dealer – Initial and Renewal

Firearms Dealer Permit:

In order to obtain or renew your local regulatory permit as a Firearms Dealer, please submit the following items to the Paradise Police Department:

For Initial and Renewal Applications:

- Town of Paradise Firearm Dealer License Application
- DOJ Certificate of Eligibility Livescan Form - Completed
- Firearms Dealer License Fee made payable to the Town of Paradise (See current Master Fee Schedule) Can be paid after Certificate of Eligibility is received.
- ****Livescan Fees made payable to the Town of Paradise (See current Master Fee Schedule)**
- Copy of Certificate of Eligibility Application
- Copy of valid State retail sales tax permit as issued by the Franchise Tax Board
- Copy of valid Federal Firearms License and/or application
- Copy of valid California Department of Justice Bureau of Firearms Certificate of Eligibility
- Copy of any additional special permits issued by the Department of Justice
 - ****Initial License only**

For Initial Applications:

The Federal Firearms License and California Department of Justice will require a Live Scan fingerprint submission. The applications are provided by the Department of Justice. When these are received by you, an appointment is necessary to complete the Live Scan. Payment for Live Scan services is payable at the time of the Live Scan appointment. Live Scan fees are non-refundable.

Fingerprint results are sent directly to the Federal Firearms License and Department of Justice. When these are cleared by the Federal Firearms License and Department of Justice, a certificate is sent to the applicant. Once the certificate is received, it must be submitted to the Paradise Police Department for verification and a copy is maintained at the Police Department.

No application will be approved until the Department of Justice has cleared the fingerprints and sends a certificate. Please note: there is no specific time frame in which the Department of Justice is required to return results of fingerprints.

You will be notified when your application has been approved. At that time, please schedule an appointment to receive your Firearms Dealer license and pay applicable fees. Address of business must be approved by the Town's Planning Director.

Firearms Dealer licenses are valid for twelve (12) months from the date of issue. To renew, please submit an updated application and follow the process above prior to the expiration of Town license and/or Certificate of Eligibility.

Employees: (See Firearms Dealer - Employee Application Packet)

Each new employee who handles, delivers, sells, shows or displays firearms is required to submit Live Scan fingerprints as per DOJ current requirements and maintain a current Certificate of Eligibility.

It is the responsibility of the applicant to know and understand the relevant Town municipal code section and any other state or federal codes which may apply.

The Town of Paradise Municipal Codes and current Master Fee Schedule can be found at www.townofparadise.com.

• It is unlawful for any person or entity to violate or fail to comply with the provisions of chapter 5.05 of the Paradise Municipal Code. Such violation shall be punishable as an infraction. • Under Federal and State law, a One Dollar (\$1.00) fee may be collected in addition to any other fees for compliance with disability access laws.

TOWN OF PARADISE

Town Hall, 5555 Skyway, Paradise, CA 95969 -- (530) 872-6291
Paradise Police Department, 5595 Black Olive Dr. Paradise, CA 95969 -- (530) 872-6241 or (530) 872-6161

Application Specific Information -Firearms Dealer

TOWN OF PARADISE USE ONLY 3/23/15

SIGNED TOWN OF PARADISE 5.05 LICENSE APPLICATION

RECEIVED BY: _____

DATE: _____

RECEIPT OF INITIAL OR RENEWAL LICENSE FEES PAID

RECEIVED BY: _____

DATE: _____

AMOUNT PAID: _____ RECEIPT # _____

COPY OF VALID STATE RETAIL SALES PERMIT

COPY OF VALID FEDERAL FIREARMS LICENSE

COPY OF VALID CALIFORNIA DEPARTMENT OF JUSTICE BUREAU OF FIREARMS CERTIFICATE OF ELIGIBILITY

RECEIVED BY: _____ DATE: _____

COPY OF CERTIFICATE OF ELIGIBILITY APPLICATION

COPY OF FEDERAL FIREARMS LICENSE APPLICATION

COPY OF ANY ADDITIONAL SPECIAL PERMITS ISSUED BY THE DEPARTMENT OF JUSTICE

RECEIVED BY: _____ DATE: _____

LIVE SCAN FINERPRINT COMPLETED/FEES PAID
(For New Applications Only)

APPROVED
By Police Department

REJECTED

BY: _____

DATE: _____

APPROVED
By Planning Director (if new business)

REJECTED

BY: _____

DATE: _____

PERMIT LICENSE # _____

EXPIRATION DATE _____

Copies Routed To: Police _____ Planning Dir. _____

COMMENTS REGARDING REJECTION OR OTHER: _____

TOWN OF PARADISE

Administrative Services Department, 5555 Skyway, Paradise, CA 95969 -- (530) 872-6291
Paradise Police Department, 5595 Black Olive Dr. Paradise, CA 95969 -- (530) 872-6241 or (530) 872-6161

Town of Paradise License Application

Initial

Renewal

TO BE COMPLETED BY APPLICANT

Applicant Name: _____

Home Address: _____

City: _____ State _____ ZIP: _____

Home Phone: _____

DOB: _____ SSN: _____

CDL: _____ State _____ Expires: _____

Mobile _____ E-Mail _____

Business Name: _____

Business Location: _____

City: _____ State _____ ZIP: _____

Phone: _____

Business Mailing Address: _____

Tax Exempt?

Charitable? Charitable Purpose? _____

List All Residences in the Last Five Years

Address: _____ From _____ To _____

Address: _____ From _____ To _____

Address: _____ From _____ To _____

Have you ever been convicted of a felony, as defined by California law? YES NO

If YES, Date of conviction: _____ Offense _____

Have you ever been required to register with a law enforcement agency pursuant to Section 290 of the Penal Code?

YES NO If YES, Date _____ Law Enforcement Agency _____

It shall be unlawful for any person knowingly to falsify or conceal any fact or make any false or fraudulent statement or misrepresentation in any matter or proceeding within the jurisdiction of any department or agency of the Town (Ordinance 16, Section 15-11).

I declare under the penalty of perjury that the foregoing is true and complete to the best of my knowledge and belief.

Signature: _____ Date _____