



**EL DORADO SHERIFF'S OFFICE**  
**APPLICATION FOR ITINERANT BUSINESS LICENSE**  
**CARDROOM WORK PERMIT**

**NEW**

**RENEWAL**

**DATE:** \_\_\_\_\_

**APPLICANTS NAME:**

**LAST:** \_\_\_\_\_ **FIRST:** \_\_\_\_\_ **MIDDLE:** \_\_\_\_\_

**ALIAS'S:** \_\_\_\_\_

**RESIDENCE ADDRESS:**

**NUMBER:** \_\_\_\_\_ **STREET:** \_\_\_\_\_ **APT. #:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**MAILING ADDRESS:**

**NUMBER:** \_\_\_\_\_ **STREET:** \_\_\_\_\_ **APT. #:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**HOME PHONE NUMBER:** ( ) \_\_\_\_\_ **BUSINESS PHONE NUMBER:** ( ) \_\_\_\_\_

**PHYSICAL:**

**DATE OF BIRTH:** \_\_\_\_\_ **SEX:** \_\_\_\_\_ **HEIGHT:** \_\_\_\_\_ **WEIGHT:** \_\_\_\_\_

**EYE:** \_\_\_\_\_ **HAIR:** \_\_\_\_\_ **DRIVER'S LICENSE NO.:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**SOCIAL SECURITY NO.:** \_\_\_\_\_ **SCARS/MARKS:** \_\_\_\_\_

**EMPLOYER OR ORGANIZATION:** \_\_\_\_\_ **PHONE:** ( ) \_\_\_\_\_

**ADDRESS:**

**NUMBER:** \_\_\_\_\_ **STREET:** \_\_\_\_\_ **APT. #:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**\*\* MUST PROVIDE COPY OF BUSINESS LICENSE YOU ARE OPERATING UNDER \*\***

**HAVE YOU EVER BEEN CONVICTED OF A CRIME?**  **YES**  **NO**

**IF YES, SPECIFY AND YOU WILL NEED TO PROVIDE COPIES OF REPORTS:**

HAVE YOU EVER BEEN ARRESTED?  YES  NO

IF YES, SPECIFY CHARGES, YEAR, ARRESTING AGENCY, AND YOU WILL HAVE TO PROVIDE COPIES OF REPORTS:

I CERTIFY UNDER THE PENALTIES OF PERJURY THAT THE ABOVE FACTS ARE TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE OR INCOMPLETE INFORMATION PROVIDED MAY BE CONSIDERED TO CAUSE DENIAL OR REVOKE A PERMIT.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

---

**OFFICIAL USE ONLY**

BUSINESS LICENSE

PHOTOGRAPH

FINGERPRINTED

LOCAL BKGRD.

CRIM. HIST. RECEIVED

DENIED    DATE: \_\_\_\_\_    REASON: \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_    BY: \_\_\_\_\_