



P A L M D A L E

a place to call home

TOBACCO/SMOKING PRODUCT RETAILER BUSINESS PERMIT APPLICATION

No permit shall be issued to authorize tobacco/smoking product retailing at any place other than a fixed location. Tobacco/Smoking Product Retailing from vehicles or on foot is prohibited (PMC Section 5.04.670.B.2)

The cost of a Tobacco/Smoking Products Retailer permit is \$350 annually.

Conditions of Approval:

1. All permittees, agents and employees are required to comply with all federal, state and local laws and regulations with regards to tobacco or smoking products, tobacco/smoking paraphernalia or tobacco/smoking product retailing.
2. No drug paraphernalia may be sold at the business seeking the permit.
3. No transaction involving tobacco or smoking products shall be undertaken with any person who appears under the age of 27 without first examining their identification to confirm that the recipient is over the minimum age required under State law.
4. No retailer shall permit any person under the age of 18 years to engage or participate in the sale of tobacco or smoking products or paraphernalia.
5. Self-service display, such as vending machines, of tobacco or smoking products is prohibited.

Any tobacco/smoking products retailer who violates any federal, state or local law regulating the sale, advertisement or display of tobacco products and/or paraphernalia shall be subject to the penalties as outlined within Section 5.04.670(H) of the Palmdale Municipal Code.

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This Application is for (check one):

- New License
- Annual Renewal
- Reissuing a Revoked License

TOBACCO/SMOKING PRODUCT RETAILER BUSINESS PERMIT APPLICATION

BUSINESS INFORMATION

Business Name: _____

Business Address: _____
_____ Telephone Number: _____

Business Mailing Address (if different): _____

Full description of business activity: _____

State Board of Equalization Tobacco Retailers License No.: _____

OWNER INFORMATION

- Individual/Sole Proprietorship Partnership Corporation

Applicant Name: _____
(If a Corporation, the name shall be as set forth in its Articles of Incorporation)

Applicant's Address: _____
_____ Telephone Number: _____

Drivers License No.: _____ Date of Birth: _____

Partnership – provide Names and Addresses of each general partner.
Corporations (if not publicly traded) - provide Names and Addresses of all directors, each executive officer, stockholders holding 10 percent or more of shares and an officer who is duly authorized to accept service of process.

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Within the past 5 years, have any of the individuals identified above been convicted in a criminal proceedings or subject to pending criminal proceedings? Yes No
If yes, the applicant may attach documentation explaining any mitigating circumstances.

Emergency Contact #1: _____
Address: _____
Telephone Number: _____

Emergency Contact #2: _____
Address: _____
Telephone Number: _____

I have read and agree to abide by the conditions of conducting retail Tobacco/Smoking Products sales within the City of Palmdale.

I agree that no Drug Paraphernalia is or will be sold at the business seeking this permit.

I declare under penalty of perjury that this application is true and correct to the best of my knowledge and belief.

Signature

Title

Date

OFFICE USE ONLY

Received: \$ _____ Date: _____

Receipt: # _____

Los Angeles County Sheriff's Department: _____

Signature

Date

Director of Planning: _____

Signature

Date