

County of Tulare

221 S Mooney Blvd Room 104E
Visalia, California 93291-4593



Cass Cook
Auditor-Controller/Treasurer-Tax Collector

Hiley R. Wallis
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Application for Retail Firearms Seller License *Under Tulare County Resolution §12070*

The undersigned hereby applies for a Retail Firearms Seller License pursuant to all applicable Tulare County Ordinance Codes and makes the following statements:

Applicant (Must be an Owner, Officer, or Partner):

Name: _____

Residence Address: _____

City, State, Zip: _____

Residence Telephone: _____ Cell Phone: _____

Business (the exact name and location of the business is as follows):

Name: _____

Address: _____

City, State, Zip: _____ Business Telephone: _____

Email Address: _____ Website: _____

Business Type: Sole Proprietor Partnership Corporation Other: _____

List Names, Addresses and Telephone Numbers of Officers, Partners, or Managing Employees:

In case of emergency, notify: _____

Additional permits held by applicant: _____

*If applying for a military license fee exemption, complete the following:

Dates of Military Service: _____

Branch of Military served: _____

Discharge Status: _____

*Attach copy of military discharge papers (form DD214 or equivalent)

I, _____, the undersigned, say that I am the Sole Proprietor/General Partner/Officer of the Applicant. Attached to this application are true copies of the following documents possessed by this applicant:

- 1) Federal FireArms License
- 2) Sellers Permit from the California State Board of Equalization
- 3) Certificate of Eligibility issued by the California Department of Justice

I am authorized to execute this application and I know the facts contained in this application to be true of my own knowledge

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____ at Visalia, CA 93291 _____
(Date) (Signature of Applicant)

RECEIPT is hereby acknowledged of the sum of Fifty-Two Dollars (\$50.00) from the above named applicant as the application fee provided for in the Tulare County Ordinance Code.

Cass Cook
Auditor-Controller/Treasurer/Tax Collector

Date: _____

By: _____
Deputy Tax Collector
Phone: 559-636-5250

FEES REQUIRED:
Application/License Fee \$50.00