

# County of Tulare

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



**Cass Cook**  
**Auditor-Controller/Treasurer-Tax Collector**

Hiley R. Wallis  
Chief Deputy, Treasurer-Tax Collector  
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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:**

License Fee	\$50.00
SB1186 fee	\$4.00