



Date Received _____
By _____
Fee _____
Case # _____

SPECIAL LICENSE PERMIT

MESSAGE ESTABLISHMENT & SERVICES/ OUTCALL MESSAGE

APPLICATION FOR: (CHECK ALL THAT APPLY)

- MESSAGE ESTABLISHMENT OUTCALL MESSAGE ENDORSEMENT
 MESSAGE TECHNICIAN TEMPORARY MESSAGE PERMIT
 NEW RENEWAL

NAME OF MESSAGE ESTABLISHMENT _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER(S) _____

APPLICANT NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____

NICKNAMES/ALIASES _____

ADDRESSES IMMEDIATELY PRIOR TO PRESENT ADDRESS OF APPLICANT

1. ADDRESS _____ CITY _____ STATE _____ ZIP _____

2. ADDRESS _____ CITY _____ STATE _____ ZIP _____

DATE OF BIRTH _____ DRIVERS LIC. # _____

SOCIAL SECURITY # _____

WEIGHT _____ HEIGHT _____ HAIR _____ EYES _____ SEX _____

NAME OF SCHOOL ATTENDED _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DATES OF ATTENDANCE _____

(PROVIDE COPY OF DIPLOMA OR CERTIFICATE OF GRADUATION AND COPY OF TRANSCRIPTS)

**Town of Yucca Valley
Community Development Department
58928 Business Center Dr
Yucca Valley, CA 92284
760 369-6575 Fax 760 228-0284**

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR?
IF YES, EXPLAIN. (DO NOT INCLUDE MISDEMEANOR TRAFFIC VIOLATIONS)

REFERENCES OF CHARACTER (AT LEAST FIVE, OTHER THAN RELATIVES)

NAME	ADDRESS
1.	<hr/>
2.	<hr/>
3.	<hr/>
4.	<hr/>
5.	<hr/>

UNDER PENALTY OF PERJURY, I DECLARE THAT ALL INFORMATION ON THIS APPLICATION IS TO THE BEST OF MY KNOWLEDGE AND BELIEVE TRUE AND CORRECT STATEMENT OF FACT. I UNDERSTAND THAT IN ADDITION TO OBTAINING A PERMIT/ LICENSE, I MUST COMPLY WITH ALL OTHER CITY, COUNTY, STATE AND FEDERAL LAWS, REGULATIONS AND ORDINANCES. NOTE: THIS APPLICATION DOES NOT CONSTITUTE A LICENSE. THE APPLICATION WILL BE REVIEWED AND DETERMINATION WILL BE BASED UPON PROVIDED INFORMATION. A RENEWAL APPLICATION MUST BE SUBMITTED ANNUALLY.

APPLICANT SIGNATURE _____ DATE _____