

PERSONAL DISCLOSURE STATEMENT
BUSINESS OWNER, MEMBER, PARTNER,
CORPORATE SHAREHOLDER, OFFICER, DIRECTOR
(ATTACH TO COMPANY OWNERSHIP INFORMATION SHEET IF APPLICABLE)

ATTENTION: If necessary, use a separate sheet of paper to fully answer the following questions. The permit may be denied, suspended or revoked if you make a false statement in this application or for those reasons specified in the City Code. The City Manager may require additional information to that given herein. **Application fees are non-refundable.**

Name: _____
(Last) (First) (Middle)

Address: _____ Phone: _____

(City) (State) (Zip)

Age: _____ Date of Birth: _____ City: _____ State: _____

Height: _____ Weight: _____ Hair Color: _____ Color or eyes: _____

California Driver License No.: _____ Expires: _____

Do you currently hold a valid City of Sacramento permit? Yes _____ No _____
If yes what type? _____

Has any permit or license that has been granted to you been revoked or denied within this City?
Yes _____ No _____

If yes, explain the circumstances surrounding this revocation or denial:

Have you ever been convicted of a crime? Answer yes or no: _____

Include convictions by verdict, plea of guilty, or plea of nolocontendere. If the answer is "Yes", give the date of arrest, the offense charged, and the offense of which you were convicted and the place where you were convicted on a separate sheet of paper:

I understand that verification of the accuracy of the above information will be conducted. I further understand and agree that the information is a matter of public record and may be made available to interested parties upon request. I hereby certify under penalty of perjury that the above information on this form and/or attachment is true and correct.

Signature

Date