

NAME	
OL NUMBER	

OCCUPATIONAL LICENSING SECTION

ZONING VERIFICATION FOR VEHICLE DISMANTLER'S LICENSE

Instructions: This form is to be completed (*in ink*) by an official of the agency responsible for zoning in your area and submitted with your application for license to a department Inspector.

In connection with an application for a Vehicle Dismantler's License to be submitted to the Department of Motor Vehicles by:

wotor verifices by:						
APPLICANT'S NAME			PRESENTLY ZONED			
BUSINESS NAME						
BUSINESS ADDRESS		CITY	STATE	ZIP CODE		
	(office, sign, and disn	eration of an automobi nantling area mandat o	le dismantling busines	5		
SIGNATURE		TITLE				
AGENCY		CITY, COUNTY, OR	CITY AND COUNTY			
DATE		AREA CODE/TELEF	PHONE NUMBER			

California Vehicle Code Section 1671(b) requires that a dismantler's place of business be in an area zoned for that type of business.

