

DEPARTMENT OF MOTOR VEHICLE A Public Service	e Agency			PHOTO SEQUENCE NUMBER TOTAL FEE COLLECTED DATE FEES PAID (DATE LINE STAMP)				
	APPLICA	TION FOR						
	ALL AF	PPLICATION						
All licensees on license.	s are responsil	ble for renew	ing their lice	ense prior to the expiratio	on date shown	Temporary Permit Issued Yes Date		
SECTION 1	— APPLYING	G FOR (Che	ck one box	.)				
	Original (SF	PO)	□ R	lenewal (SPR)	Reinsta	itement (SRX) (e	xpired license)	
SECTION 2	— APPLICA	NT INFORM	ATION (Typ	e or Print) USE YOUR 7	TRUE FULL N	NAME		
NAME (FIRST, MIDI	DLE, LAST)					TELEPHONE NUMBER	R	
RESIDENCE ADDR	ESS (NUMBER AND	STREET)		CITY		STATE	ZIP CODE	
	,	,						
OTHER ADDRESS,	IF APPLICABLE (P. O	. BOX OR PRIVATE I	MAIL BOX)	CITY		STATE	ZIP CODE	
DATE OF BIRTH		SEX		HAIR COLOR	EYE COLOR	HEIGHT	WEIGHT	
Can informati			Female	maibility and Mayle Opposit	mit. Decembilie	tion Act of 1000		
	on on last page ER LICENSE/IDENTIF			onsibility and Work Opportu EXPIRATION DATE	social security			
Have you eve	er been known l	by or used any	name other	than the name appearing	on this question	nnaire?	Yes No	
IF YES, LIST NAME	E(S)							
SECTION 3	— FMPI OYI	ED BY (Infor	mation pro	vided must be the sam	ne as Employe	er's License)		
FIRM NAME	Livii Lott	LD D1 (IIIIOI	mation pro	FIRM LICENSE NUMBER	e do Employe	TELEPHONE NUMBER		
						()		
FIRM ADDRESS (N	UMBER AND STREE	Γ)		CITY		STATE	ZIP CODE	
OFOTION 4	EVDEDIE	NOE AND E	MADI OVAKEN	UT DECODE FOR BACK	ETUDEEVEA	DC (list most	was and final \	
		NCE AND E		NT RECORD FOR PAST	I IHKEE YEA	ARS (LIST MOST	recent first.)	
FROM MO YR	MO YR	NAM		OYERS S, TYPE OF BUSINESS		DUTIES PERFORMED		
(ATTACH SEPARAT	E SHEET IF ADDITION	NAL SPACE IS NEFI	DED)					
`	— ADDITION		<u>, </u>	FORMATION				
Have you represent school ow organizati	previously bed ative, distributo ner, operator, i	en or are you or, dealer, disr nstructor, traff	now licensed nantler, manu c violator sch	d or have you ever applied afacturer, remanufacturer, tool owner, operator or instr	ransporter, ver ructor, or all-terr	ifier, lessor-retaile rain vehicle safet	er,driving y training	
Vehicles,	or by another s	state, which wa	as refused, re	or application issued by the voked, suspended or subje- IMENT, DATE OF ACTION, AND STATE	ect to other disc	iplinary action?		



FIELD OFFICE USE ONLY

					OL NO.					
	ever had a civil jud ator, officer, director] No						
	s it a result of a stat									
IF YES, STATE	ES, STATE THE AMOUNT AND WHETHER PAID OR UNPAID									
IF YES, DESC	RIBE TYPE OF LICENSE, LI	ST LICENSE NUMBER, STATE LICENSE WAS ISSUED, NAME A	AND LOCATION OF COU	JRT OF JURISDICTION	N					
4. Have vou	u as a sole owner, partner, managerial employee, officer, director, stockholder, or LLP/LLC managing member									
sought rel	relief from creditors due to financial hardship in either state or federal court?									
IF YES, DESC JURISDICTION		ST LICENSE NUMBER, STATE LICENSE WAS ISSUED, GIVE D	ATE BANKRUPTCY FILE	ED, NAME AND LOCAT	TON OF COURT OF					
		☐ Yes ☐] No							
IF YES, LIST T	HE STATE, COURT, CASE N	IUMBER, AND NATURE OF THE CHARGES								
6. EXCLUDING TRAFFIC OFFENSES: have you ever been CONVICTED, PLACED ON PROBATION, OR RELEASED FROM INCARCERATION FOLLOWING CONVICTION for any crime or offense, either Felony or Misdemeanor, of ANY jurisdiction, within the last ten years? If yes, read Important Notice To All Applicants below and complete Section 6.										
		IMPORTANT NOTICE TO A	L APPLICA	NTS						
		OUR APPLICATION, YOU MAY SUBMIT A COURT DOCUMENTS.			ENCY REPOR	RT AND A				
you are awa disclose all result in the license. Ap	aiting judgment and convictions, includ e refusal of the occ plicants need NOT if the conviction	or any other federal or state law equivalent, it sentencing following entry of a plea or jury ing those out-of-state or out-of-country may upational license. Listing all conviction information of the is more than two years old. JRETO INITIAL WILL DELAY PROCES	verdict, you must result in the car mation may not alth and Safety Applica	st still disclose ncellation of the necessarily pre Code Sections nt Initials Requ	e the convict temporary peclude you from 11357(b), (c) third in the conviction of th	ion. Failure to ermit and may m receiving a	o y a			
SECTION 6 -	— MISDEMEANO	OR OR FELONY CONVICTIONS								
				DISPOSITION	OF OFFENSE					
CONVICTION DATE	CONVICTED OF	COURT OF JURISDICTION (FULL NAME AND ADDRESS)	Amount	(DESCRIBE	(DESCRIBE SENTENCE) Term of Jail or					
	OF	(I OLE NAME AND ADDITESS)	Fined	Probation	Prison Term	Date Released				
(ATTACH SEPARATE	SHEET IF ADDITIONAL SPA	LACE IS NEEDED)								
SECTION 7 -	— APPLICANT C	ERTIFICATION								
l certify (or d I further cer Article 7, tha	eclare) under pe tify (or declare) (t I am a citizen o	nalty of perjury under the laws of the S under penalty of perjury under the la of the United States, or I am eligible to	ws of the State apply for this	e of California s benefit unde	a pursuant t	o CCR Title	13,			
Personal Re	sponsibility and	(initial)								
X										
SECTION 8 -	— EMPLOYING I	ICENSEE'S ACKNOWLEDGMENT								
I hereby certif	y that I am the auti	horized representative of the employing lice eceives a temporary permit or license fro				mploy the ab	ove			
DATE		TITLE (I.E., CORPORATE OFFICER, OWNER, OPERATOR)	5 5 5 61 6116	LICENSE NO. (SALE		ENSE NO.)				
PRINT NAME			AUTHORIZED SIGN	 NATURE						
			Y							

IT IS IMPORTANT THAT YOU READ AND UNDERSTAND THE FOLLOWING INFORMATION.

ADVISORY STATEMENT

The information required on the attached form pertains to eligibility for issuance of an occupational license. It is required under authority of Division 5 of the California Vehicle Code. Failure to provide the information is cause for refusal to issue an occupational license.

This information is public record, regularly used by law enforcement agencies, and is open to inspection by the public. Information contained in these records, classified as confidential or personal pursuant to the Information Practices Act of 1977 and the Public Records Act, is exempt from disclosure. Individuals are entitled to inspect or obtain copies of information contained in their records during regular office hours by prior arrangement.

The Occupational Licensing Branch, P.O. Box 932342, Sacramento, CA 94232-3420, is responsible for maintaining this information.

PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY RECONCILIATION ACT OF 1996

PERSONAL RESPONSIBILITY and WORK OPPORTUNITY RECONCILIATION ACT — The department has determined that Occupational Licenses are subject to the eligibility requirements imposed by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. These licenses, permits, clearances, verifications, and certificates will hereafter be referred to as PRWORA benefits(s). Aliens, who are not qualified aliens, nonimmigrant aliens under the Immigration and Nationality Act or aliens paroled into the United States under Section 212(d)(5) of the INA (8 U.S.C. s 1182(d)(5)), for less than one year, are not eligible to receive an original or renewal PRWORA benefit, as set forth in the California Vehicle Code. California Code of Regulations Sections 450.00 and 450.02.

DISCLOSURE STATEMENT

SOCIAL SECURITY NUMBER COLLECTION DISCLOSURE — You are required by law to provide your social security number or your application will be denied.

"Your social security number will be collected pursuant to California Business and Professions Code Section 30. It is used in the administration of occupational licensing laws to determine eligibility for issuance or renewal of an occupational license subject to the applicable provisions of the California Vehicle Code, California Business and Professions Code Sections 29.5, 30 and 31, as well as California Welfare and Institutions Code Section 11350.6. It is also used to aid in the collection of monies owed in connection with failure to pay a fine or failure to appear in court by an applicant; and to aid in the collection of monies owed by an applicant in connection with Aid to Families with Dependent Children, Child Support and Establishment of paternity and Federal Payments for Foster Care and Adoption Assistance Programs, pursuant to 42 U.S.C. Section 405 and 42 U.S.C. Section 651 et seq.

Your social security number is not provided for public inspection; however, it will be provided in response to requests for information from state and federal agencies operating and involved in the collection of taxes and child support payments pursuant to 42 U.S.C. 601 et seq., and California Business and Professions *Code* Section 30.

Collection of your social security number is mandatory. Failure to furnish the information requested will result in denial of processing an application for issuance or renewal of an occupational license or permit, pursuant to Business and Professions Code Section 30, subdivision(c)."

DELINQUENT TAX DEBT

DELINQUENTTAX DEBT (Effective July 1, 2012) — California state law allows the State Board of Equalization and the Franchise Tax Board to share taxpayer information with the DMV and requires you to pay a delinquent state tax obligation. Failure to pay this delinquent tax obligation may result in the suspension of your Salesperson license.

Please be advised that you may not reapply for a license until a period of one year has elapsed since a previous license for which you are applying now has been revoked, refused, or denied pursuant to California Vehicle Code Sections 11810(d) and 11107(c).

Applicant should retain this page for their information.