

COUNTY OF SAN MATEO

TAX COLLECTOR'S OFFICE
TELEPHONE: (650) 363-4142
FAX: (650) 599-1511



TREASURER'S OFFICE
TELEPHONE: (650) 363-4580
FAX: (650) 363-4944

SANDIE ARNOTT
TAX COLLECTOR - TREASURER
REVENUE SERVICES

555 COUNTY CENTER • 1ST FLOOR • REDWOOD CITY • CALIFORNIA • 94063

Business License Application: General

License for: Peddler / Solicitor Bingo Temporary Event Public Dance Hall
 Other: _____

1. Applicant's Name: Diana Watkins Telephone No. (408) 3485508
Mailing Address: 5870 Malaga Ave.
Email Address: diana@caltel.com
City: LA State: CA Zip Code: 90038

2. Business Name: Titans of Madmen's
Nature of the Business: Event Mgmt. Serv.

Is this Business a Corporation: Yes No
If yes, please give name and address of the officer authorized to accept the service of legal process.
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Business Telephone Number: () _____
Business Address: _____
City: _____ State: _____ Zip Code: _____

3. Event Location: _____
Date(s) of Event: _____

4. Past Record Licenses:
Have you ever been arrested for ANY crime? Yes No
If yes, when and where? List the charges: _____
Have you ever been convicted for ANY crime? Yes No
If yes, when and where? List the charges: _____
Are there any court cases pending against you? Yes No
If yes, please explain: _____
Have you ever been on court probation? Yes No
If yes, please explain: _____

Have you ever been issued a License by San Mateo County? Yes No
If yes, please state when and for what purpose: _____

Have you ever: (1) been refused a License or (2) had a License suspended or revoked, or (3) voluntarily cancelled your license in any state to avoid revocation? Yes No
If Yes, please give details: _____

I hereby declare under penalty of perjury that the above statements and information are true. I am fully aware that if this application is denied by the License Board for any reason then all of the fee paid with my application will be forfeited as stipulated by County Ordinance.

[Signature]
Signature of Applicant

Dated this 14th day of November, 2015
at Redwood City, California

Received by: _____ Date _____ License Fee Paid: \$ _____

		Approval	Denial
Sheriff:	Date: _____	_____	_____
Health Officer:	Date: _____	_____	_____
Planning / Zoning:	Date: _____	_____	_____
Building Inspection:	Date: _____	_____	_____
Fire Protection:	Date: _____	_____	_____

The above application for a Business License is hereby: Granted Denied
Chair of the County License Board: _____
Signature Date