



William D. Gore, Sheriff

SAN DIEGO COUNTY SHERIFF'S DEPARTMENT

License Division, 9621 Ridgeway Court, P.O. Box 939062
San Diego, CA 92193-9062

FILE # J-_____

LICENSE APPLICATION FOR: Select all that apply

☐ JUNK DEALER ☐ AUTO WRECKING YARD ☐ NON-OPERATING VEHICLE STORAGE YARD

☐ RECYCLER ***CRV & OTHER SCRAP METALS ☐ ***CRV ONLY ☐

***** NOTE:** IF YOU'RE APPLYING FOR AN AUTO WRECKING YARD, JUNK DEALER, OR RECYCLER PERMIT (RECYCLING METALS) YOU WILL NEED TO CONTACT COUNTY PLANNING & LAND USE-ZONING AT (858) 565-5981. A MAJOR USE PERMIT WILL BE REQUIRED WITH YOUR APPLICATION.

******YOU WILL ALSO NEED APPROVAL FROM YOUR LOCAL FIRE DEPARTMENT/FIRE MARSHAL PRIOR TO TURNING IN YOUR APPLICATION.**

FEES: \$394.00 FOR NEW & RENEWING APPLICATIONS (Fees are non-refundable)

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH YOUR APPLICATION – Please contact our office for an appointment (858) 974-2020.

1. Correct Fee
2. Major Use Permit
3. Assessor's Parcel Number _____ and Zoning status _____ of property where activity will occur. (Information should be obtained from the Department of Zoning 858-565-5981 prior to turning in your application.)
4. Document showing that applicant is owner of the premises or a written agreement signed by the owner permitting such use of the Premises (Lease Agreement)
5. Hazardous Material Certificate – County Environmental Health Permit or Unified Program Facility Permit
6. Vehicle Dismantler License - (From DMV)
7. Certified Recycling Center Certification (CalRecycle)
8. Certified Appliance Recycler Permit (CAR)
9. Weighmaster License
10. Stormwater Permit
11. Weights and Measures Inspection Report/Form/Receipt
12. Fictitious Business Name Statement
13. Seller's Permit
14. Approval from Local Fire Department/Fire Marshal
15. DMV Motor Carrier Permit
16. Other

BUSINESS NAME: _____ TELEPHONE # _____

BUSINESS ADDRESS: _____ FAX # _____

YARD SITE LOCATION ADDRESS, IF DIFFERENT FROM BUSINESS ADDRESS: _____

MAILING ADDRESS: _____ E-MAIL ADDRESS: _____

Check appropriate Business Description:

☐ Partnership

☐ LLC Sole

☐ Proprietorship

☐ Corporation

If yes to corporation, include name: _____

(All other partners and/or business associates **must** fill out a Background Application for Sheriff's Regulatory Activities form that is attached to this packet.)

OWNER OF PREMISES: _____ Phone #: _____

PLANNED SCHEDULE OF OPERATION

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
OPEN AT:							
CLOSE AT:							

DO YOU ACCEPT/BUY TYPE OF SCRAP METAL? ☐ YES ☐ NO

DO YOU ACCEPT/BUY ANY APPLIANCES? ☐ YES ☐ NO

IF APPLYING AS A RECYCLER IN SCRAP METAL, WHAT OTHER TYPES OF RECYCLABLE MATERIAL WILL YOU BE ACCEPTING?

(EXAMPLE: GLASS, PAPER, PLASTIC, USED MOTOR OIL, OIL FILTERS)

I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION I HAVE GIVEN IS TRUE AND CORRECT, TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AGREE TO HAVING ALL REQUIRED NOTICES, UNLESS OTHERWISE SPECIFIED, SENT BY U. S. MAIL TO THE ADDRESS GIVEN ON THE APPLICATION. I HAVE READ AND UNDERSTAND THE SECTIONS OF THE SAN DIEGO COUNTY CODE OF REGULATORY ORDINANCES PERTAINING TO THE OPERATION OF THIS BUSINESS.

Name of Applicant: _____

Signature of Applicant: _____ Date: _____

Application Accepted By: _____ Date: _____

Local Fire Department/Fire Marshal
(REQUIRED BY APPLICANT)

Approved _____ Disapproved _____

Comments _____

By _____ Date _____

Fire Chief Fax ()

Department of Planning & Development Services -
Noise

Approved _____ Disapproved _____

Comments _____

By _____ Date _____

DEPARTMENT OF ENVIROMENTAL HEALTH - Hazmat

Approved _____ Disapproved _____

Comments _____

By _____ Date _____

Department of Planning & Development Services -
Zoning

Approved _____ Disapproved _____

Comments _____

By _____ Date _____

***THIS REST WILL BE PROCESSED BY THE
LICENSE DIVISION***

Department of Agriculture Weights & Measures

Approved _____ Disapproved _____

Comments _____

By _____ Date _____

LOCAL -Sheriff's Station

Approved _____ Disapproved _____

Comments _____

By _____ Date _____

Admin Lt. MS _____

Sheriff's Department-Licensing Division

Approved _____ Disapproved _____

Comments _____

By _____ Date _____