



Application for Tobacco Retailer's License

City of Dublin Municipal Code Chapter 4.40

Mail to:

Dublin Police Services, Attn: Permit Deputy
6361 Clark Avenue, Dublin, CA 94568

Reason for Application (Check One):

- | | |
|--|---|
| ☐ New License | ☐ Annual Renewal |
| ☐ Change of Ownership | ☐ Re-Issuing Revoked License |

Provide the following documents if applicable:

- | | |
|---|--|
| ☐ Dublin Business License | ☐ California Department of Taxes and Fees Seller's Permit |
| ☐ Alameda County Health Permit | ☐ California Department of Taxes and Fees Tobacco Retail Permit |

Business Information

Business Name:	Business Phone # & Email:
Business Location Address:	
Business Mailing Address:	
Date Opened:	Location Zoning: ☐ Pre-existing ☐ New
Dublin Business License #:	California Department of Taxes and Fees Seller's Permit #:
Alameda County Health Permit #:	California Department of Taxes and Fees Tobacco Retail Permit #:
California ABC License # (if applicable):	Business Hours of Operation:

Owner / Operator Information

#1 Owner/Operator Name		Phone # & Email:
Home Address:		
Date of Birth:	Driver License ID #	Driver License Exp. Date
Violations of Chapter 4.40 Dublin Municipal Code in Previous 3 Years (if applicable). Attach additional sheets if necessary.		
Date(s):	Location(s):	
#2 Owner/Operator Name		Phone # & Email:
Home Address:		
Date of Birth:	Driver License ID #	Driver License Exp. Date
Violations of Chapter 4.40 Dublin Municipal Code in Previous 3 Years (if applicable). Attach additional sheets if necessary.		
Date(s):	Location(s):	

Application Fee: \$25.00

Tobacco License Fee: \$107.00

Please submit payment to the **Dublin Police Services** (address shown above). Payment can be in form of check or credit card.

Payment Type (Check one): ☐ Check Check # _____ ☐ Credit Card (**You must come in person to pay via credit card**)

Pursuant to **Dublin Municipal Code 4.40**, a Tobacco Retailer's License from the City of Dublin is required for the sale and distribution of tobacco products and tobacco paraphernalia. Licensees are required to comply with all Federal, State, and Local laws in the operation of their business. By signing this application, each Owner acknowledges that they have been informed of the Tobacco Retailer's License performance standards, associated fees, and regulations. Any location issued a Tobacco Retailer's License is not allowed to sell tobacco products to any person under the age of 21 years old. Selling tobacco without a license is a serious offense and could result in the denial of future Tobacco Retailer's Licenses and criminal charges. Licenses are issued to fixed addresses only and each address requires a separate license.

I hereby apply for a Tobacco Retailer's License with the appropriate fees attached to operate at the above listed address in the City of Dublin. I also hereby state the information provided in this application is true and correct.

#1 Owner (Printed) _____ #1 Owner (Signature) _____ Date _____

#2 Owner (Printed) _____ #2 Owner (Signature) _____ Date _____

FOR OFFICE USE ONLY	
Date Reviewed:	Reviewed By: ☐ Approved ☐ Denied
Comments:	
Tobacco License #:	Tobacco License Effective Date: