

MARINA POLICE DEPARTMENT

TINA M. NIETO  
Chief of Police



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BRUCE CARLOS DELGADO

# CARDROOM ESTABLISHMENT APPLICATION

| PERMIT                 | CITY     | DOJ     | FBI | F/PRINTS | TOTAL    |
|------------------------|----------|---------|-----|----------|----------|
| CARDROOM ESTABLISHMENT | \$270.00 | \$32.00 | N/A | \$45.00  | \$347.00 |
| NUMBER OF TABLES _____ | \$75.00  | -       | -   | -        | \$75.00  |
| RENEWAL                | \$270.00 | N/A     | N/A | N/A      | \$270.00 |
| NUMBER OF TABLES _____ | \$75.00  | -       | -   | -        | \$75.00  |

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**THE ABOVE FEES ARE NON-REFUNDABLE**

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APPLICANT'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME OF ESTABLISHMENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

INCORPORATION DATE: \_\_\_\_\_

**LIST NAMES, ADDRESSES AND TELEPHONE NUMBERS OF ALL OFFICERS AND DIRECTORS OF THE CORPORATION OWNING 10% OR MORE OF THE STOCK. (If partnership, list all partners).**

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
Name Address

**HAS ANY OFFICER, DIRECTOR, PARTNER, OR APPLICANT EVER BEEN CONVICTED OF ANY CRIME (except misdemeanor motor vehicle violations)? IF YES, STATE WHO, WHAT CHARGE, WHERE, WHEN, WHAT COURT, AND THE FULL DISPOSITION OF THE CHARGE.**

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**LIST THE NAMES AND ADDRESSES OF THE PERSONS WHO HAVE AUTHORITY OR CONTROL OVER THE PLACE FOR WHICH THE PERMIT IS REQUESTED AND A BRIEF STATEMENT OF THE NATURE AND EXTENT OF SUCH AUTHORITY AND CONTROL.**

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Name Address

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Name Address

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Name Address

**LIST THE TRUE NAME AND ADDRESS OF EACH PERSON, CORPORATION, PARTNERSHIP, ASSOCIATION OR OTHER ENTITY WHATSOEVER, WHICH HAS ANY INTEREST, BY LAW OF FINANCIAL PARTICIPATION OR OTHERWISE, IN THE OWNERSHIP OR OPERATION OF THE CARDROOM OR THE CARDROOM PERMIT:**

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Name Address

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Name Address

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Name Address

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APPLICANT'S SIGNATURE

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DATE