



**CALIFORNIA DEPARTMENT OF JUSTICE  
BUREAU OF FIREARMS**



**APPLICATION FOR  
CENTRALIZED LIST OF FIREARMS DEALERS**

***Part A - Firearms Dealership Information***

Firearms Dealership Name	Dealership Telephone Number (     )		Dealership Fax Number (     )			
Mailing Address	City	County	State	Zip Code		
Dealership Physical Location (if different)	City	County	Zip Code			
Days and Hours of Operation						
_____						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Local Firearms Dealer Licensing Authority (issuer of local firearms license)						
Local Law Enforcement Agency (Police or Sheriff Department)						

***Part B - Firearms Dealer Licensee Information***

Licensee Name (exactly as name appears on California Driver License or Identification Card)	
Certificate of Eligibility (COE) Number	COE Expiration Date
Federal Firearms License (FFL) Number	FFL Expiration Date
Local Firearms License Num	Local License Expiration Date
CA Board of Equalization Seller's Permit Number	

**Certification**

*"I declare under penalty of perjury (Sections 126 and 127 PC) that all statements made by me on this application are true and complete."*

\_\_\_\_\_  
Signature of Applicant listed in Part B

\_\_\_\_\_  
Date

**Part C - Additional Firearms Dealer Licensee(s)**

*Please complete this section if there is more than one licensee with a COE, FFL, and Local Firearms License for this same firearms dealership at this location. If there is no other licensee, go to Part D.*

Licensee Name (exactly as name appears on California Driver License or Identification Card)	
Certificate of Eligibility (COE) Number	COE Expiration Date
Licensee Name (exactly as name appears on California Driver License or Identification Card)	
Certificate of Eligibility (COE) Number	COE Expiration Date

**Additional Licensee Certification**

*“I declare under penalty of perjury (Sections 126 and 127 PC) that all statements made by me on this application are true and complete.”*

\_\_\_\_\_  
Signature of Additional Applicant listed in Part C Date

\_\_\_\_\_  
Signature of Additional Applicant listed in Part C Date

**Part D - Fees**

1. Enter the total number of licensees from Parts B and C.	_____
2. Multiply the number of licensees from Line 1 by \$20. This is your firearms dealership’s Centralized List of Firearms Dealers Annual Fee.	\$ _____
3. Dealer Inspection Program Annual Fee.	\$ <b>95.00</b>
4. Add the amounts of Line 2 and Line 3. This is your total Centralized List of Firearms Dealer/Dealer Inspection Program Annual Fee.	\$ _____

*Please make a check or money order payable to Department of Justice.*

Mail to:

Department of Justice  
Bureau of Firearms- Centralized List  
P.O. Box 981118  
West Sacramento, CA 95798-1118

Staple check or money order here.

## **INSTRUCTIONS FOR APPLICATION FOR CENTRALIZED LIST OF FIREARMS DEALERS**

The Application for Centralized List of Firearms Dealers must be typewritten or printed in ink. Incomplete forms will not be processed and will be returned with attached monies. Applications must be accompanied by copies of the Federal Firearms License (FFL), Local Firearms License (or alternative letter described in Penal Code (PC) section 12071), and the Board of Equalization Seller's Permit for each individual requesting listing on the Centralized List in conjunction with the dealership. If you have any questions, please call the Firearms Licensing and Permits Unit at (916) 263-8100.

### **Part A - Firearms Dealership Information**

- Provide the firearms dealership's name, mailing address and the physical location if different from the mailing address. The physical location information is frequently different when a post office box or a rural route number is used as the mailing address.
- Provide the firearms dealership's hours of operation for each day of the week, using standard am/pm abbreviations. Indicate "closed" on days the firearms dealership is not open.
- The local Firearms Dealer Licensing Authority is the local department or bureau that issues the 12071 PC Local Firearms License or alternative letter described in 12071 PC. Provide this department/bureau's name. Also provide the name of the Police or Sheriff's Department that is responsible for law enforcement protection for your community.

### **Part B - Firearms Dealer Licensee Information**

- Provide your name as it appears on your California Driver License or Identification Card. Provide your COE, FFL and Local Firearms License number and expiration dates and your Board of Equalization Seller's Permit number in the spaces indicated.
- Sign and date the certification statement affirming the information you provided is true and complete.

*(continued on reverse side)*

### **Part C - Additional Firearms Dealer Licensee(s)**

- Each licensee who is also listed on the FFL, Local Firearms License and Seller's Permit noted in Part B - Firearms Dealer Licensee Information, and who desires listing on the Centralized List for this dealership must provide his/her name as it appears on their California Driver's License or Identification Card and COE number and expiration date in the spaces indicated. The additional licensee must also sign and date the certification statement affirming the information provided is true and complete. Part C may be copied to accommodate as many additional licensees as necessary for the dealership.

### **Part D - Fees**

- The Centralized List of Firearms Dealers fee is \$20 for each of the dealership's licensees. The Firearms Dealer Inspection Program fee is \$95 per dealership. Part D provides the format to calculate the total fees for your dealership. Enter the number of licensees to be listed, multiply that number time \$20, for the total Centralized List fees. Add the \$95 Dealer Inspection fee for the total annual fees due.
- Make check or money order payable to the Department of Justice for the appropriate remittance. Attach the check or money order to the lower right margin of the form where indicated.
- Mail the completed application, remittance and documentation to:

Department of Justice  
Bureau of Firearms - Centralized List  
P.O. Box 981118  
West Sacramento, CA 95798-1118

#### **CENTRALIZED LIST APPLICATION PROCESSING TIME**

The maximum time for processing a completed application is 30 days for an initial application and 20 days for a renewal application. If the Department fails to meet the time period for processing an application, the applicant, within 30 days of the final decision granting or denying the application, may apply in writing for a full reimbursement of all application fees. The Department shall respond within 10 days of receipt of a request for reimbursement; and, if the reimbursement is denied by the Department, the applicant may appeal the denial in writing directly to the Attorney General. Further information regarding this process is provided in the California Code of Regulations, Title 11, Chapter 13, and may be obtained by calling (916) 263-8100.