

County of Riverside DEPARTMENT OF ENVIRONMENTAL HEALTH

www.rivcoeh.org

Department of Environmental Health

P.O. Box 7909 Riverside, CA 92513-7909 Phone: (951) 358-5172

District#_	
PR#	
OCR#	

APPLICATION FOR A RETAIL TOBACCO PERMIT

Riverside County Ordinance No. 838

Check #		

THIS APPLICATION IS FOR:	☐ NEW PERMIT ☐ ANNUAL RENEWAL		
DATE OF PURCHASE			
NAME OF OWNER(S):		DBA:	ALLAGE OF THE PURPLESS.
ADDRESS OF DBA:		CITY:	(NAME OF THE BUSINESS) _ZIP:
BILLING ADDRESS:		CITY:	STATE: ZIP:
PREVIOUS NAME OF BUSINESS AT	THIS ADDRESS (IF ANY):		
STATE OF CA BOARD OF EQUALIZ	ATION TOBACCO RETAIL	LICENSE #: LRQ-ET	
HAS THIS FACILITY HAD ANY PRE IF YES, PROVIDE DETAILS BELOW ADDRESS AND TYPE OF VIOLATION	V OR ON A SEPARATE SH		IVERSIDE COUNTY? YES / NO LUDE NAME OF BUSINESS, DATE,
	2400.00		
ANNUAL TOBACCO PERMIT FEE- §	<u>6428.00</u>		
PLEASE SUBMIT A CHECK OR MON RIVERSIDE COUNTY DEPARTME			PAYABLE TO:
REQUIRED BEFORE RETAILING A CONTINGENT UPON THE OBSERV WITHOUT A PERMIT IS A SERIOUS	NY TOBACCO, TOBACCO ANCE OF FEDERAL, STAT OFFENSE, AND COULD RI 'ERSIDE COUNTY RETAIL	PRODUCTS, OR TO TE, AND LOCAL TO ESULT IN SUBSTANT TOBACCO PERMITS	OF ENVIRONMENTAL HEALTH IS BACCO PARAPHERNALIA, AND IS BACCO LAWS. SELLING TOBACCO FIAL PENALTIES INCLUDING FINES S. PERMITS ARE ISSUED TO FIXED
	APPROPRIATE FEES ENCI	LOSED, TO OPERA	NVIRONMENTAL HEALTH RETAIL TE AT THE ABOVE ADDRESS IN HIS FORM IS TRUE AND CORRECT.
DATE:	OWNER(S) SIGNATUR	E:	
DRIVER'S LICENSE #/EXP. DATE:		DA	TE OF BIRTH:
BUSINESS TELEPHONE #:		HOME TELER	PHONE #:
E-MAIL ADDRESS:			
For Our Office Lesstian	o Call He at (000\722 422	A on Visit Our Woh	site at varau riveach and

For Our Office Locations Call Us at (888)/22-4234 or Visit Our Website at www.rivcoeh.org