



1350 Norris Road  
 Bakersfield, California 93308-2231

## NEW BINGO LICENSE REQUIREMENTS/INVOICE

**\*Must be a non-profit organization\***

NEW APPLICATION FEE:	\$50	MUST BE SUBMITTED IN PERSON
LIVE SCAN FEE:	\$32.00 + Rolling Fee	PRINTED BY OUR OFFICE \$52 <i>*Any bingo officer will be fingerprinted</i>

**Accepted forms of payment:** CASH, CHECK, MONEY ORDER, CREDIT CARD

*\*Only Mastercard, VISA, Discover*

**Check or Money Order payable to:** COUNTY OF KERN

**Please provide the Licensing Unit with the following required documents:**

<input type="checkbox"/> Completed New Bingo License Application and Live Scan Form <i>*Any bingo officer listed on the license will need to fill out page 2 of the application and a live scan form</i>
<input type="checkbox"/> Completed Bingo Addendum of Organization <i>*Only provide for a new application</i>
<input type="checkbox"/> Completed Bingo Officer Information Form <i>*Must <b>always</b> have <b>2</b> bingo officers on license</i>
<input type="checkbox"/> Copy of State Driver's License(s) <i>*Any bingo officer listed on license. Provide <b>every</b> renewal year</i>
<input type="checkbox"/> Copy of C.A. State Non-Profit organization status <i>*Only provide for a new application          *Proof of Non-Profit can be IRS statement, Certificate or C.A. state article</i>
<input type="checkbox"/> Copy of Letter of Authorization from owner/authorized personnel of building Bingo is held <i>*Provide <b>every</b> renewal year (This is if you don't own the building)</i>
<input type="checkbox"/> Copy of Proof of Ownership of the building <i>*Only provide for a new application</i>
<input type="checkbox"/> Approval from the Planning Dept., Fire Dept., and Health Dept. <i>*Provide <b>every</b> renewal year (This is needed if you own the building) Health Dept. may not need to approve but still need to ask them</i>
<input type="checkbox"/> Copy of Completed Live Scan Form(s) <i>*If printed somewhere other than the Sheriff's Office</i>

<b>FOR KERN COUNTY SHERIFF'S OFFICE USE</b>		DATE RECEIVED:	
RECEIPT #:		AMOUNT RECEIVED:	
RECEIVED FROM:		TYPE OF PAYMENT:	
DATE INITIAL LICENSE ISSUED:		DATE LICENSE EXPIRES:	

Kern County Sheriff's Department  
1350 Norris Road, Building B, Licensing Unit  
Bakersfield, California 93308  
(661) 391-7690

## KERN COUNTY BINGO LICENSE APPLICATION

**Organization Information:**

Name of Organization:

(Must be eligible organization under the provisions of Section 326.5 California Penal Code and Kern County chapter 5.16.060)

Location of Organization:

(Street address, City, Zip Code)

Mailing Address:

Bingo games will be conducted at this location:

(Include name of hall, street address, city and zip code)

Assessor's Parcel #or property tax identification #:

Maximum Amount of Occupancy:

Day(s) of the week of Game:

Hours of Operation:

**Please attach the copy of your certificate of Non-Profit issued by the State of California**

As applicant, we the undersigned declare under penalty of perjury that our organization qualifies as an eligible organization under section 5.16.060. At least two officers, including the presiding officer of the corporation or community chest and the trustee of any trust must sign.

I have read all of the above and declare under penalty of perjury that each and every statement made is true and correct; knowingly falsifying the information on this form may constitute grounds for denial or revocation of the license. Furthermore, I understand that if my application for license or renewal is denied for any reason, the Sheriff shall refund only that portion of the fee allocated to pay for post-issuance or renewal enforcement (Kern County Ordinance Code 5.04.160)

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_  
PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_  
PRINTED NAME: \_\_\_\_\_

**BINGO OFFICER INFORMATION:**

**BINGO COORDINATOR/CHAIRPERSON:**

NAME:
ADDRESS:
TELEPHONE: ( )
DRIVER'S LICENSE NUMBER OR CA. ID NUMBER:
SOCIAL SECURITY NUMBER:

SIGNATURE:	DATE:
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**PRESIDENT:**

NAME:
ADDRESS:
TELEPHONE: ( )
DRIVER'S LICENSE NUMBER OR CA. ID NUMBER:
SOCIAL SECURITY NUMBER:

SIGNATURE:	DATE:
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**VICE PRESIDENT:**

NAME:
ADDRESS:
TELEPHONE: ( )
DRIVER'S LICENSE NUMBER OR CA. ID NUMBER:
SOCIAL SECURITY NUMBER:

SIGNATURE:	DATE:
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**SECRETARY:**

NAME:
ADDRESS:
TELEPHONE: ( )
DRIVER'S LICENSE NUMBER OR CA. ID NUMBER:
SOCIAL SECURITY NUMBER:

SIGNATURE:	DATE:
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**TREASURER:**

NAME:
ADDRESS:
TELEPHONE: ( )
DRIVER'S LICENSE NUMBER OR CA. ID NUMBER:
SOCIAL SECURITY NUMBER:

SIGNATURE:	DATE:
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# BUSINESS LICENSE APPLICATION

Please check applicable boxes and complete entire application.

- Individual
- Corporation
- New Application
- Information Change
- Husband/Wife
- Limited Liability Co.
- Renewal Application
- Additional Street Location
- Partnership

## BUSINESS INFORMATION

BUSINESS NAME: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mail Address Same As Above:

Or If different, Mail to: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Authorized Agent \_\_\_\_\_

Operating Manager: \_\_\_\_\_

Type of Business: \_\_\_\_\_ (List Activities; List items buying or selling, Please Indicate if new items, used or both)

Business Tax Identification Number: \_\_\_\_\_

Seller Permit or Resale Number: \_\_\_\_\_ Health Permit Number(s): \_\_\_\_\_

I have read all of the above and declare under penalty of perjury that each and every statement made is true and correct: knowingly falsifying the information on this form may constitute grounds for denial or revocation of the license. "THIS LICENSE IS CONDITIONED UPON RECEIPT BY THE SHERIFF OF A SATISFACTORY REPORT FROM THE DEPARTMENT OF JUSTICE". The filing of an application for a license shall be deemed consent by the applicant, officers and applicant's or licensee's employees for the Sheriff's Office and other interested county departments including, but not limited to the directors of Planning and Development, Fire, Health, Building, and Zoning departments to determine all statements on the application are true, correct and that the ordinances and regulations are complied with. Furthermore, I understand that if my application for license or renewal is denied for any reason, the Sheriff shall refund only that portion of the fee allocated to pay for post-issuance or renewal enforcement. (KERN COUNTY ORDINANCE CODE TITLE 5, CHAPTER 5.04.160)

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

**APPLICANT PERSONAL INFORMATION**

**Applicant Name:** \_\_\_\_\_

**Aliases/Other Names:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**Driver's License Number:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_

**Address:** **Street Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

Have you ever been charged with a felony? \_\_\_\_\_

Have you been charged with a misdemeanor in the last five years? \_\_\_\_\_

Have you ever been in jail or prison? \_\_\_\_\_

If you answered YES to any of the above questions, please give date(s) and explanation of charges:

\_\_\_\_\_

**Former Employment**

(Begin with the most current for the past three years)

<u>FROM – TO</u>	<u>EMPLOYER</u>	<u>ADDRESS</u>
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List Two References**

1) Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

2) Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

I have read all the above and declare under penalty of perjury that each and every statement made is true and correct: knowingly falsifying the information on this form may constitute grounds for denial or revocation of the license.

\_\_\_\_\_  
APPLICANT SIGNATURE

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

## COUNTY BUSINESS TYPE AND LOCATION:

Per County ordinance Title 5 Business Licenses and Regulations, 5.04.010 and 5.04.020, please check the appropriate boxes for the type of license applicable to your business:

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Street Vendor<br><input type="checkbox"/> Itinerant (Mobile) Peddler<br><input type="checkbox"/> Dance (non-residential only)<br><input type="checkbox"/> Loose Vehicle Parts<br><input type="checkbox"/> Fortune Teller<br><input type="checkbox"/> Commercial Photographer<br><input type="checkbox"/> Taxi Cab Service<br><input type="checkbox"/> Taxi Cab Driver<br><input type="checkbox"/> Bingo (must be nonprofit)<br><input type="checkbox"/> Locksmith<br><input type="checkbox"/> Circus/Carnival<br><input type="checkbox"/> Swap Meet Owner<br><input type="checkbox"/> Massage Establishment<br><input type="checkbox"/> Temporary Business License<br><input type="checkbox"/> Adult Entertainment<br><input type="checkbox"/> Weapon Dealer | <input type="checkbox"/> Food Sales<br><input type="checkbox"/> Ice Cream or Shaved Ice Truck<br><input type="checkbox"/> Shaved Ice Shack<br><input type="checkbox"/> Trailer<br><input type="checkbox"/> Catering Truck / Van<br><input type="checkbox"/> New Items<br><input type="checkbox"/> Used Items<br><input type="checkbox"/> Produce<br><input type="checkbox"/> Firearm Sales<br><input type="checkbox"/> Ammunition Sales<br><input type="checkbox"/> Tire Sales<br><input type="checkbox"/> Home Office<br><input type="checkbox"/> Stand/ Table<br><input type="checkbox"/> On Line Sales<br><input type="checkbox"/> Commercial Zoned Building<br><input type="checkbox"/> Shooting Gallery |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Physical Street Address or location where business or sales is/are conducted: (Provide written permission, rental or lease agreement for premises. Provide home occupational permit for residential business, a site plan may be required)

NAME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

DAYS: \_\_\_\_\_

HOURS: \_\_\_\_\_

**Below is for County Department Approval of Business License Application**

Sheriff's Office	Approved: <input type="checkbox"/> Denied: <input type="checkbox"/>	By: _____	Date: _____
Planning or Zoning	Approved: <input type="checkbox"/> Denied: <input type="checkbox"/>	By: _____	Date: _____
Comments: _____			
Environmental Health	Approved: <input type="checkbox"/> Denied: <input type="checkbox"/>	By: _____	Date: _____
Comments: _____			
Fire	Approved: <input type="checkbox"/> Denied: <input type="checkbox"/>	By: _____	Date: _____
Comments: _____			



1350 Norris Road  
Bakersfield, California 93308-2231

### LETTER OF AUTHORIZATION

I, the undersigned as authorized  Owner of Property  Manager of Property  Leaseholder of following location where vendor is conducting business or temporary business:

\_\_\_\_\_  
Street Address, City, State, Zip Code

Located within the unincorporated area of the County of Kern acknowledge that, pursuant to separate agreement, I have authorized a moving/stationary business to be conducted by:

Applicant Name: \_\_\_\_\_

Name of Business: \_\_\_\_\_

To conduct business as a vendor or temporary business: i.e.: street vendor, food peddler, bingo, secondhand dealer/pawnbroker, weapons dealer, commercial photography, or itinerant peddler on the following date(s):

Specific date(s) as follows: \_\_\_\_\_

Or continuously for the following days and hours of operation until revocation by either party or expiration of business license: \_\_\_\_\_

Agreement shall terminate on this date: \_\_\_\_\_ or

1. On the transfer or assignment of interest in the property from the authorizing property owner, or lessee.
2. On any change of the authorizing manager

In the event of termination, the temporary business applicant shall either obtain a new authorization to conduct his business on the property, or immediately stop conducting business and remove their personal or business items.

I have not issued any other authorizations for the same property for the same date(s) or overlapping dates of commencement.

Date of Authorization: \_\_\_\_\_

\_\_\_\_\_  
Print Name of Authorization Owner/Manager

\_\_\_\_\_  
Signature, Title, Date

Owner/Manager Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Print Applicant Name

\_\_\_\_\_  
Signature, Title, Date



### REQUEST FOR LIVE SCAN SERVICE

#### Applicant Submission

CA0150000

ORI (Code assigned by DOJ)

LICENSE, CERT OR PERMIT

Authorized Applicant Type

**BINGO LICENSE**

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - If assigned by DOJ, use exact title assigned)

#### Contributing Agency Information:

**KERN COUNTY SHERIFF OFFICE**

Agency Authorized to Receive Criminal Record Information

03739

Mail Code (five-digit code assigned by DOJ)

1350 NORRIS RD

Street Address or P.O. Box

LICENSING UNIT

Contact Name (mandatory for all school submissions)

BAKERSFIELD

City

CA 93308

State ZIP Code

(661) 391-7690

Contact Telephone Number

#### Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name

(AKA or Alias) Last

First

Suffix

Date of Birth

Sex  Male  Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing Number

(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Misc. Number

(Other Identification Number)

Home

Address Street Address or P.O. Box

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service:

DOJ

FBI

If re-submission, list original ATI number:  
(Must provide proof of rejection)

Original ATI Number

#### Employer (Additional response for agencies specified by statute):

Employer Name

Mail Code (five digit code assigned by DOJ)

Street Address or P.O. Box

City

State

ZIP Code

Telephone Number (optional)

#### Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed





### REQUEST FOR LIVE SCAN SERVICE

#### Applicant Submission

CA0150000

ORI (Code assigned by DOJ)

LICENSE, CERT OR PERMIT

Authorized Applicant Type

**BINGO LICENSE**

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - If assigned by DOJ, use exact title assigned)

#### Contributing Agency Information:

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1350 NORRIS RD

Street Address or P.O. Box

LICENSING UNIT

Contact Name (mandatory for all school submissions)

BAKERSFIELD

City

CA 93308

State ZIP Code

(661) 391-7690

Contact Telephone Number

#### Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name

(AKA or Alias) Last

First

Suffix

Date of Birth

Sex  Male  Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing

Number

(Agency Billing Number)

Misc.

Number

(Other Identification Number)

Place of Birth (State or Country)

Social Security Number

Home

Address Street Address or P.O. Box

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service:

DOJ

FBI

If re-submission, list original ATI number:  
(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Mail Code (five digit code assigned by DOJ)

Street Address or P.O. Box

City

State

ZIP Code

Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed

**County Business License Fees**  
**Required License**  
**County Ordinance 5.04.160**

**TYPE OF LICENSES**                      **INITIAL FEE**                      **RENEWAL FEE**

Adult Entertainment	Call for Info.	Call for Info.
Bingo	\$50.00	\$50.00
Bingo – One Day	\$15.00	N/A
Carnival	\$211.00	\$166.00
Circus	\$181.00	\$166.00
Card Room Employees	\$100.00	\$75.00
Commercial Photography	\$80.00	\$40.00
Dance – Public	\$100.00	\$30.00
Dance – One Day (non- residential)	\$20.00	N/A
Food Peddler	\$25.00	\$25.00
Fortune Teller	\$130.00	\$65.00
Itinerant Peddler	\$130.00	\$65.00
Locksmith	\$105.00	\$40.00
Loose Vehicle Parts	\$105.00	\$65.00
Massage Establishment	\$166.00	\$75.00
Street Vendor	\$130.00	\$65.00
Swap Meets	\$281.00	\$216.00
Taxicab Service	\$80.00	\$65.00
Taxi Driver	\$55.00	\$40.00
Temporary Business	\$130.00	\$115.00
Weapons Dealer	\$130.00	\$65.00

**Additional fees collected upon submission of application**

Each additional cart, basket, or vehicle for food sales: \$15.00

Record Search by fingerprints will be charged per Department of Justice Fee and Live Scan Agency Rolling Fee

You may print the application from either the Kern County or Sheriff's website or obtain an application at the Kern County Sheriff's office at 1350 Norris Road, Bakersfield, CA 93308. Business License hours are listed below. Licensing Unit Phone (voicemail only) 661-391-7690 Email: [license@kernsheriff.org](mailto:license@kernsheriff.org)

**Public Hours:** *(Excluding Holidays)*

Monday, Wednesday, Friday 8AM-12PM

Tuesday, Thursday 12PM-4PM

**Business License Hours:** *(Excluding Holidays)*

*Same hours for Explosive Permittees, Casino Employees, Secondhand Dealer, and Pawnbroker Licenses*

Fridays Only 8AM-12PM preferably by appointment

<p><i>California Dept. of Tax and Fee Administration</i>  <b>SELLER'S PERMIT</b>  1800 30<sup>th</sup> Street., Ste. 380  Bakersfield, CA 93301  661.395.2880  <a href="http://www.cdtfa.ca.gov">www.cdtfa.ca.gov</a></p>	<p><i>Kern County Clerk</i>  <b>FICTITIOUS BUSINESS</b>  1115 Truxtun Avenue., 1<sup>st</sup> Floor  Bakersfield, CA 93301  661.868.3588  <a href="http://www.kerncountyclerk.com">www.kerncountyclerk.com</a></p>	<p><i>Public Health (Environmental Health)</i>  <b>HEALTH PERMITS</b>  2700 M Street., Ste. 300  Bakersfield, CA 93301  661.862.8740  <a href="http://www.kernpublichealth.com">www.kernpublichealth.com</a></p>		
<p><i>Planning Department</i>  <b>HOME/USE/CONDITIONAL</b>  2700 M Street., Ste 100  Bakersfield, CA 93301  661.862.8600  <a href="http://www.kernplanning.com">www.kernplanning.com</a></p>	<p><i>Bureau of Alcohol, Tobacco, &amp; Firearms</i>  <b>FIREARMS &amp; EXPLOSIVES</b>  877.283.3352 (Explosives)  866.662.2750 (Firearms)  <a href="http://www.atf.gov">www.atf.gov</a></p>	<p><i>Department of Justice</i>  <b>CERTIFICATE OF ELIGIBILITY</b>  <a href="http://www.oag.ca.gov/firearms/cert-eligibility">www.oag.ca.gov/firearms/cert-eligibility</a>  <a href="http://www.cfars.doj.ca.gov/login">www.cfars.doj.ca.gov/login</a></p>		
<p><i>Kern County Fire Department (Fire Prevention)</i>  <b>EXPLOSIVE PERMIT/FIRE INSPECTIONS</b>  2820 M Street  Bakersfield, CA 93301  661.391.3310  <a href="http://www.kerncountyfire.org">www.kerncountyfire.org</a></p>	<p><i>Public Works Department</i>  <b>CODE COMPLIANCE</b>  2700 M Street., Ste 570  Bakersfield, CA 93301  661.862.8603  <a href="http://www.kernpublicworks.com">www.kernpublicworks.com</a></p>	<p><i>Bureau of Security &amp; Investigation</i>  <b>LOCKSMITH LICENSE</b>  2420 Del Paso Road., Ste 270  Sacramento, CA 95834  916.322.4000  800.952.5210  <a href="http://www.bsis.ca.gov">www.bsis.ca.gov</a></p>		
<p><i>Bureau of Automotive Repair</i>  <b>AUTO REPAIR LICENSE</b>  3331 Sillect Avenue  Bakersfield, CA  661.335.7400  <a href="http://www.bar.ca.gov">www.bar.ca.gov</a></p>	<p><i>Alcohol Beverage Control (ABC)</i>  <b>LIQUOR LICENSE</b>  4800 Stockdale Highway, Ste. 213  Bakersfield, CA 93309  661.395.2731  <a href="http://www.abc.ca.gov">www.abc.ca.gov</a></p>	<p><i>Agriculture &amp; Measurement Standards</i>  <b>MEASUREMENT STANDARDS</b>  1001 S. Mt. Vernon Avenue  Bakersfield, CA 93307  661.868.6300  <a href="http://www.kernag.com">www.kernag.com</a></p>		
<p><i>Department of Motor Vehicles</i>  <b>VALID IDENTIFICATION</b>  3120 F Street  Bakersfield, CA 93301  800.777.0133  <a href="http://www.dmv.ca.gov">www.dmv.ca.gov</a></p>	<p><i>CA Massage Therapy Council</i>  <b>Massage License/Certificate</b>  1 Capitol Mall., Ste 800  916.669.5336  <a href="http://www.camtc.org">www.camtc.org</a></p>	<p><i>Waste Tire Management</i>  <b>TP ID NUMBER</b>  866.896.0600  <a href="http://www.calrecycle.ca.gov">www.calrecycle.ca.gov</a></p>		
<p><i>California Department of Food and Agriculture</i>  1220 N Street  Sacramento, CA 95814  916.654.466  <a href="http://www.cdffa.ca.gov">www.cdffa.ca.gov</a></p>	<p><i>Consumer Affairs</i>  <b>STATE LICENSE</b>  800.952.5210 / 916.322.4000  <a href="http://www.dca.ca.gov">www.dca.ca.gov</a></p>	<p><i>Kern County Main Office</i>  1115 Truxtun Avenue., 5<sup>th</sup> Floor  Bakersfield, CA 93301  661.868.3140  <a href="http://www.kerncounty.com">www.kerncounty.com</a></p>		
<p><i>Internal Revenue Service (IRS)</i>  800.829.1040 (individuals)  800.829.4933 (businesses)</p>	<p><i>Federal HAZMAT Request Local Enrollment-IdentoGO</i>  855.347.8371  7737 Meany Avenue., Ste B9  Bakersfield, CA 93308</p>	<p><i>Kern County Sheriff's Office</i>  1350 Norris Road  Bakersfield, CA 93308  661.391.7500  <a href="http://www.kernsheriff.org">www.kernsheriff.org</a></p>		
<p><b>City of Arvin</b>  200 Campus Dr.  661.854.3134</p>	<p><b>Bakersfield City</b>  1600 Truxtun Ave  661.326.3762</p>	<p><b>California City</b>  21000 Hacienda Blvd  760.373.8661</p>	<p><b>City of Delano</b>  1015 11<sup>th</sup> Ave  661.720.2265</p>	<p><b>City of McFarland</b>  401 W Kern  661.792.3091</p>
<p><b>City of Ridgecrest</b>  100 W. California  760.499.5026</p>	<p><b>City of Shafter</b>  336 Pacific Ave  661.746.5001</p>	<p><b>City of Taft</b>  209 E. Kern  661.763.1350</p>	<p><b>City of Tehachapi</b>  115 S. Robinson  661.822.2200</p>	<p><b>City of Wasco</b>  764 E Street  661.758.7230</p>

The Kern County Sheriff's Office issues business licenses for the unincorporated areas per Title 5 Business Licenses and Regulations Section 5.04.010. If the business is conducted within the city limits, please contact the appropriate city licensing office. The sheriff's office may require applicants, managers and/ or employees to be fingerprinted as per Section 5.04.050. If the business is a corporation, then the authorized corporate officers will be required to be fingerprinted. Title 5, Business Licenses and Regulations, Section 5.04.020 defines businesses requiring licenses.

## County Business License for Unincorporated areas of the County of Kern

Aerial Acres	Arvin	Bakersfield	Bear Valley Springs
Boron	Buttonwillow	Caliente	California City
Delano	Derby Acres	Dustin Acres	Earlimart
Edison	Edwards	Fellows	Ford City
Frazier Park	Glennville	Golden Hills	Gorman
Greenacres	Greenfield	Kernville	Lake Isabella
Lamont	Lebec	Maricopa	McFarland
McKittrick	Mettler	Mojave	North Edwards
Oildale	Onyx	Pine Mountain Club	Pond
Posey	Ridgecrest	Rosamond	Rosedale
Shafter	Stallion Springs	Taft	Tehachapi
Tupman	Valley Acres	Walker Basin	Wasco
Weldon	Willow Springs	Wofford Heights	Woody

### Kern County Licensing Unit

1350 Norris Road, Bld. A  
Bakersfield, California 93308  
(661) 391-7690  
[license@kernsheriff.org](mailto:license@kernsheriff.org)

#### **Office Hours:** *(Excluding Holidays)*

Monday through Friday 8AM – 4:00PM

#### **Public Hours:** *(Excluding Holidays)*

Monday, Wednesday, Friday 8AM-12PM  
Tuesday, Thursday 12PM-4PM

#### **Public Fingerprinting (Appointments Only) Hours:** *(Excluding Holidays)*

Monday & Wednesday 8AM-12PM  
Tuesday & Thursday 12PM-4PM

#### **Business License Hours:** *(Excluding Holidays)*

*Same hours for Explosive Permittees, Casino Employees, Secondhand Dealer, and Pawnbroker Licenses*  
Fridays Only 8AM-12PM preferably by appointment