



Special License Permit Application

Date Received	09/04/12
By	DOLSEN
Fee	0
Case #	SPL-17-12

Peddler Hawker Solicitor

General Information

APPLICANT ALBERT SOUZA Phone 760-369-8508 Fax _____
 Mailing Address 56824 Carlyle Dr Email SOUZA_Vista@Verizon.net
 City yucca Valley State Ca Zip 92284
 Driver's License # _____ State Ca
REPRESENTATIVE _____ Phone _____ Fax _____
 Mailing Address _____ Email _____
PROPERTY OWNER _____ Phone _____ Fax _____
 Mailing Address _____ Email _____
 City _____ State _____ Zip _____

Project Information

Business Name Knights of Columbus Assessor Parcel Number(s) _____
 Business Address Box 628 yucca Valley, 92284
 Applicant Signature [Signature]
 Property Owner Signature SEE ATTACHED LETTERS

Town of Yucca Valley
 Community Development Department
 Planning Division
 58928 Business Center Dr
 Yucca Valley, CA 92284
 760 369-6575 Fax 760 228-0084
www.yucca-valley.org

