



## **LAMP ADJUSTER LICENSE APPLICATION INSTRUCTIONS**

Complete this application in accordance with the instructions below and include additional pages and documents as necessary. The Bureau of Automotive Repair (BAR) cannot consider an application for licensure or renewal unless all requested information is provided. If not applicable, indicate N/A.

- Submit your completed application with all required information and fees to the BAR Licensing Program at the above address.
- Remit your fees by check or money order made payable to the Department of Consumer Affairs (DCA).
- **FEES ARE NON-REFUNDABLE PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTION 158.**
- A license will be mailed to your address of record after your application is processed and approved. The average processing time is four to six weeks from the receipt of your application, provided the application does not have any deficiencies.

### **APPLICANT INFORMATION (COMPLETE ALL SECTIONS. IF NOT APPLICABLE, INDICATE N/A.)**

1. **APPLICANT NAME:** Provide the exact name as listed on your valid, government issued, photo identification (ID).
- 2-4. Provide the personal information requested.
5. **ADJUSTER LICENSE NUMBER:** If you are renewing a lamp adjuster license, provide the number of the license to be renewed.
6. **TELEPHONE NUMBER:** Provide the area code and telephone number where you can be reached.
7. **ADDRESS OF RECORD:** A PO Box or other non-residential address may be provided as the address of record. Your license will be sent to your address of record. Your address of record is a public record and will be disclosed on BAR's website. (Business and Professions Code section 27)
8. **MAILING ADDRESS:** Provide the address at which you would like to receive your correspondence. The mailing address must be either your physical business address or residential address and cannot be a PO Box. If this section is left blank, your address of record will be used as your mailing address. However, if your address of record is a PO Box you must provide a physical business or residential address as your mailing address.
9. **EMAIL ADDRESS:** Complete only if you wish to receive correspondence from BAR by email.
10. **BACKGROUND:** This section must be completed in its entirety. Select YES or NO for all questions. Any relevant information not provided may result in denial of this application or legal action to revoke this license. Attach additional pages if necessary.

Expedited application assistance is available for current or former United States military personnel and spouses or domestic partners of active duty or reserve military personnel. A waiver of renewal requirements is available for active duty or reserve military personnel. To apply for expedited application assistance or a renewal requirement(s) waiver, you must submit required documentation as specified on BAR's website. (Business and Professions Code sections 114.3 and 115.5)

Expedited application assistance is available for applicants who were admitted to the United States as a refugee under Section 1157 of Title 8 of the United States Code, applicants who have been granted asylum by the Secretary of Homeland Security or the Attorney General of the United States pursuant to Section 1158 of Title 8 of the United States Code, or applicants who have a special immigrant visa (SIV) that has been granted status under Section 1244 of Public Law 110-181, under Public Law 109-163, or under Section 602(b) of Title VI of Division F of Public Law 111-8. (Business and Professions Code section 135.4)

Acceptable refugee, asylee, and immigration documentation includes:

- Form I-94, Arrival/Departure Record, with an admission class code such as “RE” (Refugee) or “AY” (Asylee) or other information designating the person a refugee or asylee.
- Special immigrant visa that includes the designators “SI” or “SQ.”
- Permanent Resident Card (Form I-551), commonly known as a “Green Card,” with a category designation indicating that the person was admitted as a refugee or asylee.
- An order from a court of competent jurisdiction or other documentary evidence that provides reasonable assurance that the applicant qualifies for expedited licensure.

11. **CERTIFICATION:** Read, sign, and date section 11 of this application. Signatures affirm that all statements are true and correct. Any false statements made on this application may result in denial of this application or legal action to revoke this license.

## **EXAMINATION INFORMATION**

If your application is approved, you will be contacted by the examination service contractor to schedule your examination.

You must bring two forms of ID to the examination. One must be a valid, government-issued photo ID (e.g., driver license, passport, or military). The second ID must have your signature and legal name (e.g., social security card, credit card, etc.). The name on this application must match the name on all identification you bring to the examination.

If you have a disability or impairment for which you need assistance during an examination, please obtain the Request for Special Accommodation During Administration of Written BAR Licensing Examination form on BAR’s website or call the BAR Licensing Program at (855) 735-0462 to request the special accommodation form. This form must be completed by a health professional and submitted to the BAR Licensing Program with your application.

Examination cheating violates Business and Professions Code section 123 and can result in application denial, or suspension, revocation, or restriction of a license. Once the examination begins, no talking or other communication that may compromise examination security is permitted between applicants.

For complete examination instructions, refer to the [Candidate Information Bulletin](#) on BAR’s website.

## **LICENSE INFORMATION**

Lamp and brake adjuster licenses are held independently of each other. If you wish to hold both license types, a separate application fee must be submitted for each.

Licensed lamp adjusters conduct inspections required for the issuance of Certificates of Compliance - Lamp Adjustment. They certify vehicles subject to lamp certification requirements as well as vehicles cited by law enforcement for lamp system defects. Lamp adjuster licenses are not required for general repairs on lamp systems.

Lamp adjuster licenses are valid for a period up to four years. Licensees must resubmit an initial application and fees to retake the required examination prior to the license expiration. License expiration dates are adjusted to expire in the month of the lamp adjuster’s birthday. Therefore, the license you receive during the adjustment period will be valid from 37 to 48 months.

All licensees must inform BAR of an address change within 14 calendar days. Address changes should be faxed to the BAR Licensing Program at (855) 641-9982 or mailed to the Bureau of Automotive Repair Licensing Program at 10949 North Mather Boulevard, Rancho Cordova, CA 95670. (California Code of Regulations, title 16, section 3351.1(d))

## **NOTICE ON COLLECTION OF PERSONAL INFORMATION**

### **COLLECTION AND USE OF PERSONAL INFORMATION**

- BAR and DCA use the personal information requested on this form to identify and evaluate applicants for licensure, issue and renew licenses, and enforce licensing standards set by law and regulation. BAR is authorized to collect this information by Business and Professions Code sections 30 and 9887.2, Labor Code section 432.7, Civil Code section 1798 et seq. (Information Practices Act), and California Code of Regulations section 3306.
- Pursuant to Business and Professions Code section 27, the address of record is a public record and will be posted on BAR’s website.

- Disclosure of your Social Security Number (SSN), Individual Taxpayer Identification Number (ITIN), and/or your Federal Employer Identification Number (FEIN) is mandatory. Business and Professions Code section 30 and Public Law 94-455 (42 USC 405(c)(2)(C)) authorizes collection of your SSN/ITIN/FEIN. Your SSN/ITIN/FEIN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Family Code section 17520, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN/ITIN/FEIN, your application will not be processed AND you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you.

## **POSSIBLE DISCLOSURE OF PERSONAL INFORMATION**

BAR and DCA make every effort to protect personal information provided. However, the information provided may be disclosed in the following circumstances:

- In response to a Public Records Act request (Government Code section 6250 et seq.), as allowed by the Information Practices Act (Civil Code section 1798 et seq.);
- To another government agency as required by State or Federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

Effective July 1, 2012, the State Board of Equalization and the Franchise Tax Board may share taxpayer information with BAR.

Your license may be suspended by BAR if your state tax obligation is not paid.

## **ACCESS TO PERSONAL INFORMATION**

Pursuant to Civil Code section 1798 et seq. (Information Practices Act), the Director of DCA is responsible for maintaining the information on this application. Individuals have the right to review the records maintained on them by the agencies, unless the records are exempt by Civil Code section 1798.40.

## **CONTACT INFORMATION**

For questions about this notice or access to your records, you may contact the BAR Licensing Program at 10949 North Mather Boulevard, Rancho Cordova, CA 95670 or by phone at (855) 735-0462. For questions about DCA's Privacy Policy, you may contact DCA at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210, or by email at [dca@dca.ca.gov](mailto:dca@dca.ca.gov). For questions about the Information Practices Act, you may contact the Attorney General's Office, California Department of Justice - Attention: Public Inquiry Unit, PO Box 944255, Sacramento, CA 94244, by phone at (800) 952-5225 or online at [www.oag.ca.gov](http://www.oag.ca.gov).



## LAMP ADJUSTER LICENSE APPLICATION

### FOR DEPARTMENT USE ONLY

License #:

Receipt #:

ATS #:

Date Processed:

### APPLICATION TYPE OR FEE *(Select one only)*

INITIAL *(or renewal postmarked more than 30 days after license expiration date)* **\$10.00**

RENEWAL *(postmarked by license expiration date)* **\$5.00**

LATE RENEWAL *(postmarked up to 30 days after license expiration date)* **\$7.50**

Please type or print legibly in ink. If not applicable, indicate N/A.

### APPLICANT INFORMATION

#### 1. APPLICANT NAME

Last

First

Middle

#### 2. DATE OF BIRTH

#### 3. SOCIAL SECURITY/INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER

#### 4. GOVERNMENT PHOTO ID ISSUING AUTHORITY, DOCUMENT TITLE, AND NUMBER (EXAMPLE: CALIFORNIA DRIVER LICENSE A123456)

#### 5. ADJUSTER LICENSE NUMBER (RENEWALS ONLY)

#### 6. TELEPHONE NUMBER

#### 7. ADDRESS OF RECORD

Number and Street or PO Box

Suite or Unit #

City

State

Zip Code

Note: Address will be posted on BAR's website.

#### 8. MAILING ADDRESS

Number and Street

Suite or Unit #

City

State

Zip Code

#### 9. EMAIL ADDRESS

#### 10. BACKGROUND

##### a. Have you ever served in the United States military?

If YES, you must provide required documentation. Refer to instructions page.

YES

NO

##### b. Are you married to or in a domestic partnership or other legal union with an active duty member of the U.S. military assigned to a duty station in California under official active duty military orders?

If YES, you must provide required documentation. Refer to instructions page.

YES

NO

##### c. Are you a refugee, asylee, or holder of a special immigrant visa?

If YES, you must provide required documentation. Refer to instructions page.

YES

NO

##### d. Has the Department of Consumer Affairs (DCA) or Bureau of Automotive Repair (BAR) ever issued you a license?

If YES, provide the type of license(s) and license number(s) below:

YES

NO

##### e. Have you ever had a license, certificate, or registration denied, suspended, revoked, or placed on probation by DCA or BAR?

If YES, provide a statement of explanation.

YES

NO

<p><b>f. Has DCA or BAR ever issued you a citation?</b></p> <p>If YES, provide a statement of explanation.</p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p><b>g. Have you ever been convicted of any offense or entered a plea of nolo contendere in the United States or a foreign country?</b></p> <p>This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. Note: Convictions that were adjudicated in the juvenile court or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b) should not be reported. Convictions that were later dismissed by the court or set aside pursuant to section 1203.4, 1203.4a, 1203.41, 1203.42, or 1203.425 of the California Penal Code or equivalent non-California law MUST be disclosed.</p> <p>If YES, provide a statement of explanation, including the crime for which there was a conviction, the approximate date and location of the crime, and the sentence served if any.</p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p><b>h. Exclusive of juvenile court adjudications and criminal charges dismissed under section 1000.3 of the California Penal Code or equivalent non-California laws, or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b), have you had a conviction that was later dismissed or set aside by the court?</b></p> <p>If YES, provide a statement of explanation.</p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p><b>i. Is any criminal action pending against you, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict?</b></p> <p>If YES, provide a statement of explanation.</p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p><b>11. CERTIFICATION</b></p> <p>I certify under penalty of perjury under the laws of the State of California that all the statements I have made in this application and all attached supporting documents pertaining to this application are true and correct.</p> <p>SIGNATURE OF APPLICANT _____ DATE _____</p>		

**NOTE:** Once submitted, your application for lamp adjuster license and supporting documentation become the property of BAR and will be kept as a matter of record. MAKE A COPY OF THIS COMPLETED AND SIGNED APPLICATION FOR YOUR RECORDS.