



Revenue Division  
 PO Box 2200  
 Santa Monica, CA 90407-2200

**PERFORMANCE PERMIT  
 NOTICE OF VIOLATION OBJECTION**

**OFFICE USE ONLY**

Permit #: \_\_\_\_\_

*Date Stamp*

P: 310-458-8745 • F: 310-451-3283  
 E: [business.license@santamonica.gov](mailto:business.license@santamonica.gov)  
 W: [santamonica.gov/businesslicense](http://santamonica.gov/businesslicense)

If you have received a notice of violation, which you believe was issued in error, you have the right to submit a written objection. Please complete this form within 10 days of the date of the violation.

**PERFORMER INFORMATION**

Performer Name: \_\_\_\_\_

Mailing Address:

Number                      Street                      Unit/Suite #                      City                      State                      Zip

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Permit Number: \_\_\_\_\_

**NOTICE OF VIOLATION OBJECTION**

Notice of Violation Number: \_\_\_\_\_

Notice of Violation Date: \_\_\_\_\_

If you have received a notice of violation, which you believe was issued in error; you have the right to submit a written objection within 10 days.

**OBJECTION**

Please use the space below to explain the occurrence in which a violation was issued and your objection:


**DECLARATION & SIGNATURE**

I declare under penalty of perjury the following statement is true with reference to the violation above.

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
 Printed Name                      Signature                      Date

SANTA MONICA PERFORMANCE PERMIT — NOTICE OF VIOLATION OBJECTION