

16. **FEES:** Calculate your registration fee and, if appropriate, a late fee payable to the Department of Justice:

- a. Number of business locations, including principal place of business, from Question 4f: _____
- b. **Registration Fee:** multiply the total number of locations from Question 16a by \$100.
If this application is more than one year late, multiply each location by the # of years that location was operated: \$ _____
- c. **Late Fee:** A late fee is due with your application if you postmark your registration later than your filing deadline. The filing deadline is ten days prior to doing business in the State of California. Calculate your late fee by determining:
- (1) Number of days from the first day following your registration filing deadline to the postmark date. (Example: You began business on June 15. Your due date was June 5. You postmark your registration June 30. From June 5 to June 30 is 25 days late.): _____
- (2) Multiply the number of days late in 16d by \$5 per day, not to exceed the maximum \$500: \$ _____
- d. Total amount enclosed including the registration fee from Question 16b plus any late fee from Question 16c(2). \$ _____
- e. Attach a check or money order for the total fee required from Question 16d and make it payable to the **Department of Justice**. Fill in your check or money order number: _____

17. Name, Address and Telephone Number for each independent agent pursuant to Section 17550.20(g) Attach additional pages as necessary:

NAME	ADDRESS	PHONE NO.
NAME	ADDRESS	PHONE NO.
NAME	ADDRESS	PHONE NO.
NAME	ADDRESS	PHONE NO.
NAME	ADDRESS	PHONE NO.
NAME	ADDRESS	PHONE NO.

18. **TRAVEL CONSUMER RESTITUTION FUND (TCRF):** Participation in TCRF is required for all Sellers of Travel whose business is either headquartered within the State of California doing business with consumers in California, and any Seller of Travel which is a corporation publicly traded on a national securities quotation system or stock exchange doing business in California from at least one location in California.

TCRF fees must be paid directly to the Travel Consumer Restitution Corporation (TCRC). TCRC will send proof of payment directly to the Seller of Travel Program.

CAUTION: Do not pay your seller of travel registration fee or late fee from any trust account established pursuant to Section 17550.15. Disbursement of passengers' funds for purposes other than payment for contracted goods and services or to make refunds may be a crime.

Check one of the two following boxes:

- Applicant is a participant in TCRF; or
- Applicant is not a participant in TCRF because (please check all that apply):
- a. the business is headquartered outside the State of California;
 - b. the business does not do business with persons located in California;
 - c. the business does not conduct business from any location within California; and/or
 - d. the applicant corporation is not publicly traded on a national securities quotation system or stock exchange.

IMPORTANT: Make a copy of this completed application packet for your records!

Mail to: **Seller of Travel Program
Office of the Attorney General
Department of Justice
300 South Spring Street, Suite 1702
Los Angeles, CA 90013-1230**

Verification Page

19. All Principals (Owners, Officers, Partners, or Sole Proprietors) of the registering Seller of Travel must date, sign, fill in the city and state where they sign, and print their name. All corporations, partnerships, or trusts having an investment in the filer as identified in Question 7b must have a duly authorized officer of the owning corporation, partnership, or trust date, sign, and print their name below and fill in the city and state where signed. All signatures must be original. A faxed, photocopied, or stamped signature is not acceptable because this is a legal document signed under penalty of perjury.

Original signatures may be on separate copies of this verification page:

I/we declare under penalty of perjury under the laws of the State of California that all of the information provided in answer to questions 1-18 and the Attachments, is true and correct.

(1) _____
DATED SIGNATURE _____

SIGNED AT: CITY, STATE PRINT NAME _____

(2) _____
DATED SIGNATURE _____

SIGNED AT: CITY, STATE PRINT NAME _____

(3) _____
DATED SIGNATURE _____

SIGNED AT: CITY, STATE PRINT NAME _____

(4) _____
DATED SIGNATURE _____

SIGNED AT: CITY, STATE PRINT NAME _____

(5) _____
DATED SIGNATURE _____

SIGNED AT: CITY, STATE PRINT NAME _____

(6) _____
DATED SIGNATURE _____

SIGNED AT: CITY, STATE PRINT NAME _____

AUTHORIZATION AND CONSENT FORM

Authorization for Disclosure of Information Held by Service Providers, Carriers, Other Sellers of Travel, The Airlines Reporting Corporation (ARC) or International Association of Travel Agents Network (IATAN), and any Business Records maintained by or on behalf of

(Seller of Travel Name)
at any bank or financial institution.

(Seller of Travel Name) irrevocably consents to the California Attorney, General, District Attorney of any County within California, or their authorized representatives obtaining any information related to an investigation of a Seller of Travel's compliance with Business and Professions Code § 17550.21.

The consent shall be signed by all owners, partners, or corporate officers listed in the registration application.

I/We hereby consent to the disclosure of information maintained by above referenced entity(ies) and declare under penalty of perjury under the laws of the State of California that all of the information provided in answers on the Seller of Travel Application dated _____ is true and correct.

_____ Typed Name	_____ Position	_____ Signature	_____ Date
_____ Typed Name	_____ Position	_____ Signature	_____ Date
_____ Typed Name	_____ Position	_____ Signature	_____ Date
_____ Typed Name	_____ Position	_____ Signature	_____ Date
_____ Typed Name	_____ Position	_____ Signature	_____ Date
_____ Typed Name	_____ Position	_____ Signature	_____ Date
_____ Typed Name	_____ Position	_____ Signature	_____ Date