Talent Agency License Application Guide

Division of Labor Standards Enforcement 09/29/2016

This guide is intended to be used as a reference or checklist while the applicant fills out the application. While this information will be relevant to the paper version of the Talent Agency License application, this guide is organized according to the layout of the online application form. The online version of the application consists of 4 tabs or pages. This guide provides a detailed explanation of the various sections of each page. Following the explanation will be an image of that screen with a corresponding label for each section referenced in the guide.

Note that this guide mentions forms which are required to obtain necessary documentation. The online guide has links to the necessary forms and, where applicable, sample forms. It is the applicant's responsibility to properly file the necessary forms and obtain the required documentation before completing the Talent Agency License application.

Please complete the Talent Agency License application online at: <u>https://permits.dir.ca.gov/TalentAgency/index.jsp</u> Most of the required forms can also be found on this webpage. List of Tabs/Screens:

Tab/Screen 1: Application Tab/Screen 2: Company Tab/Screen 3: Questionnaire Tab/Screen 4: Certification

This following list shows the forms that you might be asked to upload in order to complete your application. You will need to scan the document(s) to your computer and saved a copy of it so you can upload that file, if requested.

1) Workers Compensation Insurance documents.

2) Talent Agency Bond document.

3) Copies of your Fictitious Business Name Statements, if using DBA's.

4) Copy of your Articles of Organization, if company is an LLC.

5) Copy of your Articles of Incorporation if your company is a Corporation.

6) Copy of your Statement of Domestic Stock if your company is a Corporation.

7) Copy of your Premise Certification.

8) Copy of your Fees Schedule.

9) Copies of the contracts between the artist and your talent agency.

10) Business Tax Registration Certificate showing the residence address.

11) Statement of Information for Limited Liability

Talent Agency Licensing Explanation

Section	Create a New Application	Explanation
1A	Name of legal entity	Input the legal entity name registered with the California Secretary of State's office for LLCs and corporations. If the applicant is a sole proprietor or a partnership, use the name that appears on the applicant's drivers' license. Make sure to spell the name correctly.
1B	Main office address	Enter the physical address of the main office.
1C	(Add button) Please enter branch locations and or any DBAs	Clicking on the "Add" button opens the pages needed to fill out if you have other branch offices or are doing business under a fictitious name or DBA click on the ADD button.
1D	Save and Close	If you have not finished completing this page and need to return to it later, click on Save and Close. If this page is left open and not used for more than 20 minutes, the page will automatically shut down and you will lose all your information.
1E	Save and Next	If you have completed filling out all the information on this page, click on Save and Next to continue to the following page.
1F	Office Location or DBA	Choose office location or DBA, to open appropriate page.
1G	Office Location	Enter branch office address and phone number.
1H	DBA	Upload copy of file fictitious business name statement

Talent Agency Licensing - Application
Please enter the information requested below
Company:
Name of legal entity 1A
Main office address * 15
City* State* Zip code* Business phone* Mobile phone
Same as main office
Preferred mailing address*
City* State* Zip code*
Business phone Mobile phone
Email address * (DLSE uses this to communicate with applicant)
Please enter branch locations (other than the main location) and or any DBA(s) by selecting the Add link below.
Function Type Address Phone DBA Name FBNS
(Click the "Add" link below to enter each of your branch office locations or DBA's)
Save And Close 1D Save And Next 1E
Location or DBA Information - Fill in all fields below
Location of DDA mitormation - Fill in all netus below
Please choose a type *
Office location OBA
DBA name *
Click the link below to upload a copy of your Fictitious Business Name Statement' Upload copy of Fictitious Business Name File
Cancel Add
Leastian as DDA laformation. Sill is all fields below
Location or DBA Information - Fill in all fields below
Please choose a type "
Office location DBA
Cancel Add

Section	Legal Entity page	Explanation
2A	Legal Entity	Select the appropriate business type. If the applicant is a corporation or LLC, more information will be required on the next screen.
2B	Business Tax Registration Certificate	This certificate is issued by the city where your business is located in. This is required if your business is located at a business residential location.
2C	Corporation or LLC ID Date Formed / Organized Corporation / LLC Name	If the applicant is incorporated or an LLC, provide the entity number or corporate ID, the date of incorporation or organization, and the name (with correct spelling) of legal entity registered with the California Secretary of State.
2D	Statement of Information	If the applicant is a corporation, upload a copy of the Statement of Information submitted to the California Secretary of State's office
2E	Articles of Incorporation/Organization	If the applicant is an LLC, upload a copy of the Articles of Incorporation/Organization submitted to the California Secretary of State's office.
2F	Is the Corporation or LLC in good-standing with California Secretary of State?	Make sure to select N/A if the applicant is not a corporation.
2G	Ownership/Corporate Officers/ Financial Interest	Provide all owners' personal information, references and Live Scan.
2H	Management	Provide managers' personal information, references and Live Scan.

Application	Company	Questionnaire	Certification	Fees	Defect	Notes	
Company - Co	rp/LLC						
Legal Entity:* /	Applicant's form of le	egal entity (check or	ie)				
	2A						
Sole Proprie	torship (individual)	0	Partnership	Limited Liability	Company	Corporation	
Is your business	located at resider	ntial location ?*	🔍 Yes 🕠	No			
	quired to upload a	copy of your Busi	ness Tax Registra	ition Certificate sho	wing the residenc	e address by click	ing the link
below : Click to uploa	Business Tax Req	istration Certificate	28				
Corporation of L				Date Formed / Ur			
COLUM LIGHT OF L					yam.		
Corporation / LL	.C Name *			State of Incorpor	ation *	~	
Upload copy of	you Statement of	Information > Req	uired if Corp) –		¥ ::	Upload copy of Sta	atement
		2i					
Upload copy of	your articles of Inc	corporation/Organi	Zau n 2E	2F	_	Upload copy of Art	ucles
Is the Corporation	on or LLC in rood-	standing with Cali	iornia Secretary o	f State? 🔵 🔾 Y	'es 🔍 No 🔍 N	1/A	
If No Explain					(
Ownership / Co	orporate Officers	/ Financial Intere	st 2G				
Estable informat					It		
name, residential	addresses, and soc	artners, corporate of ial security numbers	of all partners.	nbers of the Talent A	gency business. If	partnersnip, piease	enter tuli
- Click the Add Ind	ividual link below to	add a person -					
Add Individuals							
Managamant							
Management :	2H						
Enter full names	, residential address	es, and social secu	rity numbers of all r	persons employed by	the applicant who	exercise	
management res	ponsibility over any	Talent Agency ope	rated by applicant's	forms of legal entity			
- Click the Add N	lanagement link bel	ow to add manager	s who are not alrea	dy l <mark>isted as owners</mark> a	bove		
Add Non-Owner	Management						

Ownership - Fill in all fields below	v for owners, partners, o	corporate officers a	nd financial inte	erest
First Name *	Middle Name	Last Name *		Birth Date *
Title *	% owned	SSN or Tax ID *	c	Confirm SSN or Tax ID *
	%			
Birth city * and State *	Di	river's License/ID # *		Please upload a copy of your driver's license or ID *
Birth city * and State *				Upload Copy of D.L. or ID
Home Address * (PO Box not allowed	d) Email addre	ess *		
City *	State * Zip co	ode *	Spouse name	
		E 11		•
Home Phone * Cel	l phone	Explain spouse p	participation in t	DUSINESS
Mailing address:	ne as home address			
Address *	ne as nome address			
Address			_	
City *	State * Zip code	*		
	✓			
List occupations for the last 2 years (If currently employed with this emplo		e as the end date)		
Employer *	Occupation *		Start date *	End date *
Address *	City *		State *	Zip code *
			~	
Remove				
Click the button to add another emp	bloyment row A	dd Row		

	ne following information		
Reference must be a nor	n-relative that you have known for more than two	(2) years. *	
First name *	Middle name	Last name *	
Home address * (PO Bo)	(not allowed.)		
Cit*	State * Zip code *		
City *	State * Zip code *		
	UN		
Employer *			
Email address			
Home Phone *			
	Cancel	Add	

Add

Cancel

Section	Questionnaire page	Explanation
3A	Questionnaire	Please answer all of the yes or no questions
3B	Space for writing answer	Please provide an explanation if the applicant checked "yes" for ANY of the questions
3C	New applicants are required to upload sample copy of Non- Exclusive and Exclusive Contracts	The contract samples provided contain approved language and provisions required by California law.
3D	Schedule of Fees to be used	The sample schedule of fees contains the legally required language.
3E	You must attach your bond information	NEW APPLICANTS must attach scans of all the original signed bond documents. Renewal applicants need only provide proof of a current bond. The information must match what is listed on the application.
3F	Surety Company and Effective Date	The information must match what is in the attachment. Even though the application asks only for the effective date of the bond, the bond must be current. The attachment must contain proof that the bond is current.
3G	Worker Compensation Insurance certificate	Upload a scan of the applicant's workers' compensation certificate. The carrier's name and expiration date must match that listed on the workers' compensation certificate. It must be valid through the next license period.

Application	Company	Questionnaire	Certification	Fees	Defect	Notes	1
Questionnaire	3 A						
1) Does any pers	son named in the Ov	wner, Management o	r Financial Interest	sections presently:	*		
A) Owe an emplo	oyee any unpaid wa	ges? ——					s 🔿 No
B) Have an unpa	id judgment outstar	nding?					s 🔿 No
16 m/ "			······································	1 . f b		h a h	
• IT Yes	to any of the above,	, provide details below	w, indicating the kin	id of business and e	explain the circumsta	ances below.	
					~	38	
2) Will the busine	ess of this talent age	ency be conducted in	connection with an	y other business?*		→ • Y	es 🕛 No
 If "Yes" 	indicate the kind of	business and circum	stances in the box l	pelow.			
-						~	
						~	
3) Have any of th	e Owners, Manage	rs and/or Financial In	terest persons liste	d in this application	ever plead quilty, n	olo contendere	
or been convictor	d of a crimo, oithor i	misdemeanor or felor				- v	es 🔍 No
or been convicted	d of a chine, entier i	inistemeanor or leior	iy :				53 110
 If "Yes" 	please explain the o	ircumstances in the l	box below.				
-							
						0	
						· · · · · · · · · · · · · · · · · · ·	
4) Have any own	ers ever had any lic	ense or permit issue	d by an agency of t	he state of Californi	a suspended, revok	ed, denied or had	
any disciplinary a	action of any nature	imposed on them in	connection with the	holding of any such	n license or permit?	* O Y	es 🔍 No
• If "Vos"	indicate the type of	license/permit, date,	nlace and circumst	ances in the box he	low		
- 11163	indicate the type of	ilcenserpernit, date,	place and circumst	ances in the box be			
						^	
						~	

5) Have you ever operated an Artist's Management Agency, Theatrical Employment Agency, Musician Booking Agency,	
Talent Agency firm? *	🔍 Yes 🔍 No
If "Yes" indicate the type of license, effective dates and the name of the business below	
	0
6) Is this application for a new license?*	O Yes O No
You are only required to upload any contracts, schedules or bonds below if they are new or have changed previous submission.	from a
7) Will the Talent Agency have sub-agents or any other employees?*	🔍 Yes 🔍 No
If "Yes" you will be required to fill out the Worker's Compensation Insurance section later in this application	
8) New applicants are required to upload a sample copy of the Non-Exclusive or Exclusive contracts between the artist	and the agency for approval.
You can download sample copies of those documents have Sample Copy of Non-Exclusive Contract Sample Copy of Excl	usive Contract 30
All contracts must contain the provisions set forth in section 12001 of the California Code or Regulations.	
To upload a sample contract, scan a copy to your computer and click the link below to complete the file upload.	
Upload Copy of Non-Exclusive Contract Upload Copy	y of Exclusive Contract
9) New applicants are required to upload a copy of the Schedule of Fees to be the time out with of Fees must, at a n language specified in the sample Schedule of Fees you can download he <u>Sample Schedule of Fees</u> required by Cali section 12003.5.	
Note - No Talent Agency shall collect a registration fee from an artist. (California Labor Code section 1700.40 a)	
To upload a copy of your Schedule of Fees, scan the document to your computer then click the blue link below to upload	d the file.
Upload Copy of Schedule of Fees	
10) You must attach your bond information.	
You can download a sample copy of a bond form hore Comple Copy of Talent Agency Bond Form	
Surety Company * Effective Date	
11) If there are employees other than the owner(s), a copy of your WCI (Workers Compensation Insurance) certificate n	nust be attached. *
A) Please attach a copy of your WCI by clicking the link here	36
WCI Carrier * Expiration Date *	
Back Save And Close Save Save And Next	
Dack Save And Cluse Save Save And Next	

Section	Certification	Explanation
4A	Premises Certification, Relevant Statutes,	Click on the links to download the required
	Enforcement Offices DLSE	documents.
4B	Box - I certify that all the content in this	Make sure to check this box.
	application is true and that this e-signature	
	is both legal and binding	
4C	Full name	Please be sure the name matches the name
		that appears on the applicant's driver's
		license.
4D	Title	Make sure this field is filled in.
4E	Submit and Pay	Click Submit and Pay
4F	Pay Fees	Click on EFT or Credit to pay license fees.
4G	Submit Confirmation	Confirmation Notice that the application has
		been successfully submitted

Premises Certifica	ition				
I hereby certify that Labor Code read as		h I shall conduct business as a T	alent Agency fully c	complies with section 1700.9(a) of the	California
 No license sh artist. 	all be granted to condu	ct the business of a talent agency	y: (a) In a place that	will endanger the health, safety or we	Ifare of the
Labor Standards Er	nforcement (furnished b	elow) will all be downloaded from	the link below, fille	nd a list of enforcement offices of the I d out and signed if necessary and are quired by Labor Code sections 1700.2	all posted, on
		the documents mentioned above mises Certification and post all o		copies of the documents at the address(es) that appear on your	application
1. Premises Certific	ation		Premis	ses Certification	
2. Relevant Statutes	S	÷	All and a second	ant Statutes	
3. Enforcement Offic	ces of the DLSE		and the second sec	ement Offices DLSE	
Click the link below	v to upload a complete	ed copy of your Premises Certi			
	mises Certification Fo				
employer to secure payment of compet- l/We agree to oper- by the Labor Comm Applicant understar submitted in conne The undersigned h the applicant is in c ANY MATERIAL M SIGNATURE : (The individual own authorized corporat	e the payment of compensation for liability under ate as a talent agency in nissioner of the State O nds and acknowledges ction herewith is ground ereby certify under pen- complete compliance with IISREPRESENTATION: her or partner with author te office or member mathematical statematics and the statematical statematics in the statematics in the	nsation for liability under the stat r state worker's compensation law n compliance with the provisions f California. that any misrepresentation, falsif ds for denial of this application or alty of perjury the statements main the local government's busines S IS GROUNDS FOR DENIAL, C prization to speak for the compan	e's worker compens w has been secured of the California Lal ication, or material of subsequent revoca de and information j ss licensing and reg DR SUBSEQUENT I w must sign. If busir	bor Code and with the Rules and Regronsion on this application or any doction of license. provided on this application are true arional regulatory requirements. REVOCATION OF A LICENSE.	proof that the ulations issued cument nd correct and
-			- 0° - 10-		
	Back	Save And Close	Save	Save And Next	
alent Agency Lice	nsing - Submit App	plication			
v clicking on the su	ibmit and nav buttor	below, you have complete	d the application	for a Talent Agency Licensing.	Once your
oplication has been	reviewed, you will b	be sent an email informing y	ou that your lice	nse has been approved or needs suse of incomplete information,	5
allowed to resubm	nit the application w		do so, click the	Edit button on the Main Menu,	
and the necessary	changes and result	and your incense application.			

Back



Pay Fees					1
* Review t	the required fees an	id annount due.			
* Click on	the credit or EFT be	utton to proceed to the			
payment s					
* Otherwis	e, click Back to exit	t to the previous screen.			
		ht. Cart			
	Quantity	My Cart Item Descriptio		Amount	
	1	Main Office Licens		\$225	
	0	Branch Office Licen	100000000000	\$0	
	1	Filing Fee	36166	\$25	
		Subtotal		\$2.50	_
By cl	licking on submit l ot issued a license	below, I understand the e.	fees paid a	re non-refundable,	even if l
	Back	Use EFT		Use Credit	AF
	Please selec	t payment method			
	Total Am	aunt 250 00 USD			
	Total Am	ount 250.00 USD		All paym	ent information are
					d transmitted only via a bit SSL (Secure Socket
	\checkmark				r) connection.
		_			
🛛 American	Express 🛛 Dine	ers 🛛 Discover 🛛 🖸	MasterCard	ISA	
	Continue				
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