



LICENSE APPLICATION

For
PAWNBROKER
SECONDHAND JEWELRY DEALER
SECONDHAND ARTICLE DEALER

CHECK ALL THAT APPLY:

<input type="checkbox"/> Original Application	<input type="checkbox"/> Renewal
TYPE: <input type="checkbox"/> Pawnbroker	<input type="checkbox"/> Secondhand Jewelry Dealer
<input type="checkbox"/> Secondhand Article Dealer	
<input type="checkbox"/> Temporary Location: _____	
Temporary Event Dates: _____	
<input type="checkbox"/> Permanent License: Expires 12/31/20__ __	

INSTRUCTIONS:

INDIVIDUAL LICENSE – Complete Sections 1, 2, 3 and 6
 PARTNERSHIP LICENSE – Complete Sections 1, 2, 3, 4 and 6
 CORPORATE LICENSE – Complete Sections 1, 2, 3, 5 and 6

(SECTION 1) APPLICANT INFORMATION

Applicant Name (Last, First, MI)	Sex	Race	Date of Birth	Place of Birth (City & State)
Street Address	City	State	Zip Code	Home Telephone Number

(SECTION 2) CONVICTION RECORD

Have you, or any other person listed on this application, been convicted of any of the following:

A FELONY WITHIN THE LAST TEN (10) YEARS? YES NO

WITHIN THE LAST TEN (10) YEARS OF:

A misdemeanor? YES NO

A statutory violation punishable by forfeiture? YES NO

A County or Municipal Ordinance violation? YES NO

For each "YES" response provide the date of arrest, the nature of the offense and conviction information:

(SECTION 3) BUSINESS INFORMATION

Business Name	Street Address	City	State	Zip Code	Telephone Number
Owner's Name	Street Address	City	State	Zip Code	Telephone Number
Business Manager's Name	Street Address	City	State	Zip Code	Telephone Number
Building Owner's Name	Street Address	City	State	Zip Code	Telephone Number

(SECTION 4) PARTNERSHIP INFORMATION

Partnership Name: _____

List Name, address, sex, race and date of birth (DOB) of all partners. *Attach additional sheets, if necessary*

Name (Last, First, MI)	Sex	Race	DOB	Street Address	City	State	Zip

(SECTION 5) CORPORATE INFORMATION

Corporation Name: _____

State of Incorporation: _____

List Name, address, sex, race and date of birth (DOB) of all corporation officers and directors. *Attach additional sheets, if necessary*

Name (Last, First, MI)	Sex	Race	DOB	Street Address	City	State	Zip Code

(SECTION 6) PENALTY NOTICE

I understand that this license may be denied or revoked for fraud, misrepresentation or false statement contained in the application or for any violation of Wis. Stats. §§ 134.71, 943.34 or 948.63.

I certify that I have no delinquent taxes, assessments, or other claims in whole or part owed to neither the City of Neenah nor any delinquent forfeiture resulting from a violation of any City ordinance.

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge. I agree to inform the clerk within ten (10) days of any change in the information supplied in this application.

Signature of Applicant: _____

Print Name of Applicant: _____

FOR ADMINISTRATIVE USE ONLY

Date of Application	Date Effective	License Expiration 12/31/20 __	Clerk Signature
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FEES RECEIVED: Pawnbroker Bond \$500.00 Secondhand Article License \$80.00
 Pawnbroker License \$210.00 Secondhand Jewelry License \$80.00

TOTAL FEE: \$ _____

BACKGROUND CHECK INFORMATION

Recommend Approval Recommend Denial (Attach Explanation)

Applicant meets guidelines for issuance of Pawnbroker, Secondhand Jeweler Dealer and/or Secondhand Article Dealer:

- | | |
|---|---|
| <input type="checkbox"/> No outstanding Court fines (Patty K) | <input type="checkbox"/> Police Background Check completed (Angela B) |
| <input type="checkbox"/> No delinquent taxes (Karen J) | <input type="checkbox"/> CCAP check completed |
| <input type="checkbox"/> No delinquent forfeitures (Patie F) | <input type="checkbox"/> No Delinquent Water Bill (Julie) |