



**LICENSE APPLICATION
PAWNBROKER**

The undersigned hereby applies for a license to conduct business in the City of Sterling, and states, under oath, that the following facts are true:

1. Name under which business is to be conducted: _____

2. Name of applicant. For individual, address(es) for last five years. If a corporation, give names and addresses of president and secretary; if a partnership, give names and addresses of all parties. *(attach separate sheet if necessary):*

3. Applicant Address: _____

4. Applicant Telephone: _____ (home) _____ (cell)

5. Address where business will be conducted: _____

6. Has applicant ever had a license denied or revoked? Y/N If yes, please explain: _____

7. Has applicant (any partner or officer of corporation) ever been convicted of a felony? Y/N If yes, please explain:

8. Name of three (3) Character References:

Name: _____ Phone: _____

Address: _____ Bus/Cell Phone: _____

Name: _____ Phone: _____

Address: _____ Bus/Cell Phone: _____

Name: _____ Phone: _____

Address: _____ Bus/Cell Phone: _____

9. Tax I. D. Number: _____ or Sales Tax Number: _____

The undersigned makes these statements above so the City of Sterling can issue the license applied for and agrees to comply with all laws and ordinances as prescribed by the City of Sterling.

The Applicant swears and/or affirms that he has answered all of the above questions truthfully and to the best of his ability. The Applicant states that he meets all the qualifications and authorizes the City of Sterling to obtain any and all records necessary to verify the statements on the application. Further, the Applicant acknowledges that any false statement on the application shall result in the rejection of the application and may result in the suspension or revocation of the owner's license.

Dated this _____ day of _____, 20 _____.

Applicant's Signature

Subscribed and sworn to before me this _____ day of _____, 20 _____.

Notary Public

FOR OFFICE USE ONLY

Fee: \$100.00, annually

\$1,000 Bond Exp: _____

Approved: _____
Date

City Clerk