

NOVI CITY CLERK'S OFFICE 45175 TEN MILE ROAD NOVI, MI 48375 (248) 347-0456 Fax (248) 347-0577

PAWNBROKER LICENSE APPLICATION Act 273 of 1917

Business information:

Name of bu	ısiness:			
Business ad	dress:			
City:	State:	Zip:	Phor	ne number:
Select the t	ype of ownership: 🔲 Ir	ndividual 🗌 Part	nership 🗌 Co	orporation 🗌 Other:
Applicant in	nformation:			
Name of ap	oplicant:			
Applicant's	home address:			
City:	State:	Zip:	Phor	ne number:
Applicant's	driver's license numbe	r (attach copy)	:	
Applicant's	: Height	Weig	ht	Sex
	Date of Birth	n l	Hair Color	Eye Color
Two previou	us addresses prior to the	e present addre	ess:	
 Nan Ado Nan Ado Nan Ado 	ne: lress: lress: lress:			
	nformation: (For all addit nployee" form)	ional employees	, please comp	olete a separate "Pawnbroker Application for
Name of er	nployee:			Date of birth:
Employee's	home address:			
City:	State:	Zip:	Phor	ne number:
Employee's	driver's license numbe	er (attach copy)	:	
				Date of birth:
				ne number:

Provide a full accurate and complete business history detailing experience, including, but not limited,
whether or not such person has previously had any ownership interest in, or worked at, in this or
another city or state, the same or similar business, including whether any license or permit issued,
whether any such license or permit was ever denied, revoked, or suspended, the reason thereof and
business activities, or occupations including the full name and address of the business and the name
and phone number of any contact persons. (Attach additional pages as necessary)

Provide a full and complete statement describing all criminal convictions other than misdemeanor traffic violations, fully disclosing the jurisdiction in which such conviction occurred, the offense for which conviction, or such conviction and the circumstances thereof. (Attach additional pages as necessary)

into	vide a statement indicating that proper equipment will be installed for the direct electronic entry to the City's computerized system, transaction information, or recording by electronic transmission suant to Chapter 27.5. (Attach additional pages as necessary)		
Applications without the following attachments will be considered incomplete and WILL NOT be accepted by the City Clerk's Office:			
	A copy of the front and back of the applicant's current driver's license.		
	Two front-faced portrait photographs taken within 30 days of the date of application, at least two inches by two inches in size.		
	"Pawnbroker Application for Additional Employee" form for each employee and a copy of the employee's current driver's license.		
	\$250 non-refundable application fee (cash or check)		
	Attach one of the following: o Articles of Incorporation o Partnership Agreement o Articles of Incorporation		
	Before issuance of the license, the applicant shall give a bond to the Treasurer's Office in its corporate name, in the penal sum of \$3,000.00, with at least 2 sureties, conditioned for the faithful performance of the duties and obligations pertaining to the conduct of the business and for the payment of all costs and damages incurred by any violation of this act. The governmental unit shall approve the bond.		

Please initial that you have read and understand the following	statements:				
I understand that I may be asked to supply answers t by the Director of Public Safety or his or her authorize					
I understand that a complete set of fingerprints will be taken by the Novi Police Department. Applicant will be contacted by the Novi Police Department to set-up an appointment date.					
I hereby certify that the above information is true and accurate to the best of my knowledge and further understand and represent that if any changes to the above information are made, that said information will be supplied to the City immediately.					
I hereby authorize the City of Novi to seek information and conduct an investigation into the truth of the statements set forth in this application and qualifications of the applicant.					
I declare under penalty of perjury that the informa and correct.	tion contained in this application is true				
	Signature of applicant				
	Printed name and title				
Subscribed and sworn before me, this day of	, 20				
Notary public County, Michigan					
My commission expires:					
For office use only					
Receipt number:					
Copy of applicant's driver's license					
Additional Employee Forms & Driver's Licenses					
Criminal History Statement					
Business History Statement					
Two Photographs					
Equipment Statement					
BOND					
Articles of Incorporation <u>OR</u> Partnership Agreement <u>OR</u> Articles of Incorporation					