



- ☐ New Application – See fee schedule on page 3.
☐ Renewal Application – Fee: \$100.00

APPLICATION FOR PAWNBROKER LICENSE
MUNICIPAL CODE CHAPTER 32
MAY 1 to APRIL 30

The undersigned hereby makes application for a Pawnbroker license in the City of DeKalb for a period commencing May 1, 2024 and ending April 30, 2025, as indicated hereafter.

Business Name: _____

Address: _____

Telephone: _____ / _____
(During Business Hours) (Emergency/After Hours)

Email Address: (a valid email address is required for future correspondence): _____

Describe Premises To Be Licensed: _____
(New Licenses Only - Attach drawing of building indicating general lay-out and dimensions)

Ownership: ☐ Individual (Complete Section A)
☐ Partnership (Complete Section B)
☐ Corporation (Complete Section C)

A. Individual: Name – Address – Phone

B. Partnership: Names – Addresses – Phone Numbers

C. Corporation:

Name: _____

Date of Incorporation: _____

Corporation's Registered Agent: _____
(Name, Address, Phone)

Object for which corporation was organized: _____

Corporation Officers, Directors and Stockholders:

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Home Phone</u>
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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Home Phone</u>
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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Home Phone</u>
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NEW APPLICANTS ONLY: COMPLETE A PERSONAL INFORMATION SHEET (COPIES ATTACHED) FOR EACH INDIVIDUAL, PARTNER, ASSOCIATION OFFICER, OR CORPORATION OFFICER, DIRECTOR AND STOCKHOLDER.

Length of time applicant(s) has been in this business or a similar related business: _____

Amount of goods, wares, and merchandise on hand at the time of application: _____

Has applicant(s) made application for a license for a similar related business on premises other than listed herein?
____ Yes ____ No

If yes, location and status of such application: _____

Has applicant(s) ever been convicted of violating any municipal or county pawnbrokers ordinance?
____ Yes ____ No

Has applicant(s) had a previous license issued by any unit of government suspended or revoked?
____ Yes ____ No If yes, attach explanation of the reason.

List the name, address, phone number of all persons who will be employed as a manager for the business:

<u>Name</u>	<u>Address</u>	<u>Phone</u>
<u>Name</u>	<u>Address</u>	<u>Phone</u>
<u>Name</u>	<u>Address</u>	<u>Phone</u>
<u>Name</u>	<u>Address</u>	<u>Phone</u>

Will applicant agree to notify the City Manager's Office of any changes in employee managers prior to such employee assuming that duty? ____ Yes ____ No

Has the applicant or the applicant's officers, directors, partners or any other person involved in the operation or management of the pawnbroker business ever pled, been found guilty, or have pending charges for a felony or any crimes including, but not limited to Theft; Theft of Lost/Mislaid Property; Forgery; Deceptive Altering/Sale of Coins; Robbery; Armed Robbery, Burglary; Possession of Burglary Tools; Unlawful Sale of Firearms; Criminal Usury; Juice Racketeering. ____ Yes ____ No If yes, attach explanation.

Does the applicant/and/or premises to be licensed, have any outstanding, past due debts, fines, or fees to the City or any ongoing code violations? ____ Yes ____ No If yes, attach explanation.

Does applicant beneficially own the premises for which a license is sought? ____ Yes ____ No
If no, does applicant have a lease for the full period for which the license is to be issued? ____ Yes ____ No
If yes, attach a copy of the lease.
If no, name, address and phone number of the property owner: _____

STATEMENTS:

The undersigned hereby states that he/she has received and read a copy of Section 32.02-04 of Chapter 32 of the DeKalb Municipal Code and will not knowingly violate, or allow any agents or employees to knowingly violate any of the provisions contained therein

The undersigned hereby states that the applicant will testify under oath to all competent, relevant and material questions propounded to him in any hearing conducted by the City Manager, either before or after the issuance of a license to him and that his failure to so testify shall be sufficient reason for the refusal to issue any such license to him or for the suspension or revocation of any license which has been issued to him

The undersigned hereby states that all persons, either as an individual, co-partner, corporation officer/director/stockholder and all managers are qualified to obtain a license pursuant to this Section of the Municipal Code. The undersigned hereby states that the information contained in this application is true to the best of his/her knowledge and that all statements set forth are of his/her own free will.

Signature of Applicant: _____

Date: _____

**STATE OF ILLINOIS)
COUNTY OF DEKALB)
CITY OF DEKALB)**

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

Notary Public

Return completed application form and fee to:

City of DeKalb
Attn: Ruth Scott
164 E. Lincoln Highway
DeKalb, IL 60115

Renewal License Fee: \$100.00 per year, payable to the "City of DeKalb", upon issuance of license and each renewal.

Application Fee (New Applicants Only): This application must be accompanied by a non-refundable fee of \$100.00, plus \$50.00 per person for the background investigation and fingerprinting.