



City Clerk's Office
11701 Community Center Dr.
Northglenn, CO 80233
303.450.8755

Pawnbroker License Application

Application Fee: \$500.00
License Fee: \$5,000 Annually

Applicant: _____

Individual Corporation Partnership Limited Liability Company Other _____

Address: _____
Street City State Zip Code

Phone Number: _____

Trade Name (or DBA) of Business: _____

Address of Business: _____ Zip Code: _____
Street Unit #

Business Phone: _____ Are the premises owned or rented? _____

If rented, name of property owner: _____

Lease Expiration Date: _____ Property Owner's Phone Number: _____

Name of On-Site Manager: _____ Date of Birth: _____

Is the applicant or any partner, officer, director, manager, or shareholder (greater than 10% financial interest) of said applicant under the age of 21? Yes No

If yes, explain in detail: _____

Has the applicant or any partner, officer, director, or shareholder (greater than 10% financial interest) of said applicant been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or are there any current charges pending? Yes No

If yes, explain in detail: _____

President: _____
Name Address Date of Birth

Vice-Pres: _____
Name Address Date of Birth

Treasurer: _____
Name Address Date of Birth

Secretary: _____
Name Address Date of Birth

All shareholders (greater than 10% financial interest):

Name	Address	Date of Birth
Name	Address	Date of Birth
Name	Address	Date of Birth
Name	Address	Date of Birth

Manager(s) of this Premise:

Name	Address	Date of Birth
Name	Address	Date of Birth

NOTE: A complete individual history report and set of fingerprints are required for each applicant, partner, officer, director, manager, or shareholder (more than 10% financial interest).

I affirm that I am familiar with Chapter 18, Article 3 of the Northglenn Municipal Code regulating the operation of a pawn business within the City of Northglenn, certify that all of the information provided on this application is complete and correct to the best of my knowledge, and understand that a false answer to any of the foregoing can result in the denial or revocation of a pawnbroker license. I also acknowledge that the license, if granted, will expire in one year and must be renewed annually.

Signature: _____

Date Signed: _____

STATE OF _____)
)
 COUNTY OF _____)

Sworn to before me this ____ day of _____, 20__, by _____

Notary Public

My Commission Expires: _____