



Finance Department □ 102 N. Neil St. □ Champaign, IL 61820

APPLICATION FOR PAWNBROKER – SECONDHAND GOODS DEALER

FEE: \$100.00 per business per year. (May not be pro-rated)

The undersigned applicant hereby makes application for the year ending April 30, 20__, for the issuance of a license to engage in the business indicated below. The applicant further authorizes that a credit check and a police background check be made on him as a condition for the issuance of the license.

(Check blocks that apply)

- PAWNBROKER SECONDHAND GOODS DEALER
 INDIVIDUAL PARTNERSHIP CORPORATION

Application fee submitted \$ _____ cash check other

Full name of applicant: _____

Home address: _____

County _____

Home Phone Number _____

How long have you lived at this address? _____

Length of time resident of: Illinois _____ County _____ City _____

Birthdate ____ / ____ / ____ SS# _____

Driver's License # _____ State _____

Business name:

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Business address:

—

Business telephone:

Length of time in business:

Date the business began at its present location:

Was the business name same as now? _____ If not, give the name that it formerly had.

—

List governmental units to which applicant has submitted an application for a business required to be licensed by Article III, Chapter 28, Champaign Municipal Code, 1985), the dates of such applications, the dispositions of such applications, the reasons and any penalties imposed and the length and the dates of any suspensions or revocations.

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Manager's full name:

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Home address:

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How long have you lived at this address?

Length of time you have been a resident of Illinois: _____ County:

City: _____ Birthdate:

Social Security

Driver's license number: _____

State _____

Home telephone: _____

List all of the applicant's and the applicant's manager's convictions for any felonies, theft, and theft-related or larceny offenses under any federal or state law or any municipal ordinance violation:

Applicant _____

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Manager _____

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AFFIDAVIT

I swear that I am the sole owner of the business above described, that the premises are located and names as stated and comply with all respects with the requirements of Champaign City Code entitled "Pawnbrokers and Secondhand Goods Dealers", and that I and my manager are qualified and eligible to obtain the license applied for herein under said Champaign City Ordinance.

I swear that I will not violate any of the laws of the State of Illinois or of the United States of America or the ordinances of the City of Champaign in the conduct of the place of business described herein and that the statements contained in this application

are true and accurate and are made for the purpose of inducing the City of Champaign to issue the license herein applied for.

Name of Applicant _____
(Please print)

Signature of Applicant _____

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

Notary Public

My commission expires: _____

DO NOT WRITE ON THIS PAGE - FOR OFFICE USE ONLY.

License Number: _____ Date Approved/Disapproved:

License Fee: _____

Approved/Disapproved _____
(Police Official)

Approved: _____
License Officer or City Clerk

revised 3/22/99



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AUTHORIZATION FOR POLICE RECORD SEARCH

I hereby authorize and empower the City of Champaign, Illinois and its agents to conduct a police record search;

SIGNED ON _____
AT _____

SIGNATURE: _____

NAME: _____

— Please print (last) (first) (middle int.)

ALIAS NAMES USED (maiden, etc.) _____

ADDRESS: _____

— _____

PHONE NUMBER: _____
(area code)

DATE OF BIRTH: _____ HEIGHT _____ WEIGHT _____

SOCIAL SECURITY NUMBER: _____

DRIVER'S LICENSE
NUMBER _____ / _____

(State)

