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 business: _____

Business address: _____

City: _____ State: _____ Zip: _____ Phone number: _____

Email address: _____

Select the type of ownership: ☐ Individual ☐ Partnership ☐ Corporation ☐ Other: _____

Applicant information:

Name of applicant: _____

Applicant's home address: _____

City: _____ State: _____ Zip: _____ Phone number: _____

Applicant's driver's license number (attach copy): _____

Applicant's: Height _____ Weight _____ Sex _____

Date of Birth _____ Hair Color _____ Eye Color _____

Two previous addresses prior to the present address: _____

_____

_____

Provide the names and addresses of three adult residents in Oakland County who will serve as character references, who must be persons other than relatives and business associates:

1) Name: _____
   Address: _____
2) Name: _____
   Address: _____
3) Name: _____
   Address: _____

Employee information: (For all additional employees, please complete a separate "Pawnbroker Application for Additional Employee" form)

Name of employee: _____ Date of birth: _____

Employee's home address: _____

City: _____ State: _____ Zip: _____ Phone number: _____

Employee's driver's license number (attach copy): _____

Name of employee: _____ Date of birth: _____

Employee's home address: _____

City: _____ State: _____ Zip: _____ Phone number: _____

Employee's driver's license number (attach copy): _____

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)

Provide a statement indicating that proper equipment will be installed for the direct electronic entry into the City's computerized system, transaction information, or recording by electronic transmission pursuant to Chapter 27.5. (Attach additional pages as necessary)

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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.

☐ $500 non-refundable application fee

☐ Attach one of the following:
- Articles of Incorporation
- Partnership Agreement
- 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 to any questions or information requested by the Director of Public Safety or his or her authorized representative.

_____ 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 information contained in this application is true and correct.

_____
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 OR Partnership Agreement OR Articles of Incorporation