



City of Caldwell
PO Box 1179
205 S 6th Ave
Caldwell, ID 83605
Phone: 455-4656
Fax: 455-3003

PAWNBROKER LICENSE

RENEWAL APPLICATION

Date: _____

FEE: \$50.00

Pursuant to Title IV, Chapter 3, Caldwell City Code, I hereby make application to renew the Pawnbroker License.

Name of Applicant: _____

Name of Business: _____ **Phone:** _____

Business Address: _____

Mailing address if different from location: _____

E-Mail Address: _____

Owner Date of Birth: _____ **Last 4 #'s of Social Security:** _____

ATTACHMENT REQUIRED: COPY OF CURRENT DRIVER'S LICENSE

Name of Operating Manager: _____

Is Business: Individual _____ Partnership _____ Corporation _____

NOTE: Every Pawnbroker shall keep a record of article pledged with him or sold to him, and this record shall be open to the inspection of any Police Officer at anytime during the hours of business. Such records shall be upon a form as required by the Chief of Police.

1. Have you, or the person named as operating manager, within the past 3 years, been convicted of, paid any fine, been placed on probation, received a deferred sentence, received a withheld judgment, suffered the forfeiture of a bond for failure to appear or completed any sentence of confinement for any felony or misdemeanor? **Yes** ____ **No** _____. If yes, give details: _____

2. Have you had a similar license revoked by this City or any other City of this State or the United States? **Yes** ____ **No** _____. If yes, give details: _____

3. Do you hereby authorize the City of Caldwell, its agents and its employees, to seek information and conduct an investigation into the truth of the statements set forth in your application and qualifications? **Yes** ____ **No** ____ **INITIAL:** _____

STATEMENT UNDER OATH:

Being first duly sworn, deposes and says that he/she is making the foregoing application and made said statements therein and hereafter for the purpose of securing a Pawnbroker License with the corporate limits of the City of Caldwell; and affirms that the facts stated above and hereafter are true; and he/she is familiar with the Ordinance of the City of Caldwell relative to Pawnbrokers.

Applicant Signature

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

Notary Public for the State of Idaho

Residing at _____

Commission Expires: _____

APPLICANT: DO NOT WRITE BELOW THIS LINE

Police Record Check

Name of CPD Staff Person Conducting Review: _____

Comments: _____

Approved or Denied - Planning & Zoning Director: _____

Date: _____

Approved or Denied - Chief of Police: _____

Date: _____

Approved or Denied - City Clerk: _____

Date: _____