



100 Parkers Mill • Oswego, IL 60543
 Phone: (630) 554-3259
 Website: <http://www.oswegoil.org>
 Email: registration@oswegoil.org

APPLICATION FOR PAWN BROKERS & SECOND HAND DEALERS

Please return completed Application and Fee to Village Clerk
License Period: January 1 through December 31

- Pawnbroker & Second Hand Dealer License Fee: \$200 per year. LICENSE BOND for \$1,000 MUST accompany completed application
- The Owner/Manager of the establishment MUST complete and SIGN this application. ALL items MUST be completed. If not applicable, enter "N/A" on the line. Incomplete applications may be returned and will not be processed until completed. If additional space is needed please utilize a separate sheet of paper.
- This license is not transferable to other location(s) or owner(s) other than that listed below.
- This license MUST be posted in public view at the location of the business(s).

Business Information

1. Applicant Name: _____ Date: _____

2. Business Name: _____

Business Address: _____

Mailing Address (if different): _____

Phone Number: _____ Email Address: _____

Location for which the license is requested: _____

Character of Business (Principle Business Activity) or objectives for corporation: _____

Length of time the Applicant has been in a business of this character: _____

3. Name of Building Owner: _____

Address of Building Owner: _____

Mailing Address of Building Owner (if different): _____

Phone Number: _____ Email Address: _____

***** OFFICE USE ONLY *****

Approved Not Approved License No.: _____ Date of Issuance: _____
 Background Check \$1000 License & Permit Bond Application Fees: \$200.00
 Received Copy of Ordinance (Hard Copy or Electronically) Date Received: _____

APPLICANT Information

4. Applicant Name: _____ Driver's License Number: _____

Address: _____

Phone Number: _____ Email Address: _____

D.O.B.: _____ M/F: _____ Citizenship: _____

Place of birth: _____

Mailing Address (if different): _____

Are you a Sole Proprietor? Yes No **If yes, skip to Question 9**

BUSINESS OWNERSHIP Information

Please provide the following information regarding how the business was created and is owned:

Corporation Partnership Limited Liability Corporation (LLC)

5. Business Owner Name: _____

Business Owner Address: _____

Mailing address (if different): _____

Contact person: _____ Telephone number: _____

Date of Incorporation and objects for which corporation was incorporated: _____

6. If the majority interest of said corporation/partnership/membership is owned by one (1) person or his nominees, please provide the full name and address:

Name _____ Driver's License Number: _____

Address: _____

Phone Number: _____ Email Address: _____

D.O.B.: _____ M/F: _____ Citizenship: _____

7. Full name and address of all partners/shareholders/members and list principal business activity of each partner. If a naturalized citizen, please list the date and place of naturalization.

(a) _____ Driver's License Number: _____

Address: _____

Phone Number: _____ Email Address: _____

D.O.B.: _____ M/F: _____ Citizenship: _____

Principal Business Activity: _____

10. Have you, or in the case of a corporation the local manager, or in the case of partnership any of the partners, ever held a license or had interest in a license issued by the Village of Oswego or any other jurisdiction regulating the purchase or sale of used property been revoked for cause?

Yes No If yes, please provide a list of revocations with date and jurisdiction.

Revocation:	Date:	Jurisdiction
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners ever made application for a similar or other license on premises other than described in this application?

Yes No Disposition: _____

12. Will you report/upload to the Village’s electronic reporting system each day before 12:00 PM, the listed information for each transaction conducted?

Yes No

13. Will you familiarize yourself with all the laws of the United States, State of Illinois, and ordinances of the Village of Oswego, pertaining to the purchase or sale of used property and abide by all of them?

Yes No

14. Will you maintain your premises in a clean and sanitary manner free from conditions that might cause accidents?

Yes No

PENALTY: Any person found liable/guilty by a preponderance of the evidence of a violation of the Village Code, relating to this licensing, in an administrative/judicial hearing shall be subject to a class IV fine, plus applicable hearing costs, as provided in subsection 1-4-3G of this code.

I, _____ have personally read and answered each and every question in this license application, and hereby certify that each and every answer is true and correct. I understand any misrepresentations submitted may be cause for denial and revocation of the license. The undersigned does hereby state under penalties of perjury that all statements in the foregoing application are true and correct; that the person or persons applying for such license are all of good moral character and have not been convicted of a felony; that if a license is granted hereunder, the undersigned will review the Village of Oswego Code of Ordinances, the State of Illinois Compiled Statutes and the Laws of the United States of America and is not disqualified by reason of any matter or thing contained in this document.

Signed: _____ Date: _____
(Authorized Signature)

Title: _____

CONSENT TO CONDUCT BACKGROUND CHECK

TO WHOM IT MAY CONCERN

I authorize and empower the Village of Oswego Police Department to obtain, prepare, use and furnish information concerning my general reputation, personal characteristics and mode of living through correspondence or personal interviews with neighbors, friends of associates or others with whom I am acquainted or who may have knowledge concerning any of the above items.

Upon written request I understand that said Police Department will provide me with information regarding the scope of the investigation if one was/is made.

I acknowledge that a photostatic or electronic copy of this release form will be as valid as an original, even though the said photostatic or electronic copy does not contain an original writing of my signature. This release becomes invalid after one year from the date of signing.

Signature: _____

Printed Name: _____

Address: _____

Date: _____