

Pawnbroker, Precious Metal or Secondhand Goods Dealer License Application

Part I – General

If applicant is an individual, this application shall be completed by such person; if a corporation, by an officer; if a partnership, by one of the general partners; if an unincorporated association, by the manager or managing officer.					
1.	Type of license	□ Pawnbroker□ Secondhand goods dealer	□ Precious metal dealer□ Secondhand goods occasional		
2.	Type of applicant	☐ Individual (8) ☐ Partners	ship (9)		
3.	Legal name of license partnership, corporation	·			
	Address		Phone ()		
4.	Business name				
	Address		Phone ()		
		anducted under a designation, name or sumed Name as required by Minnesota S	style other than the name of the applicant, attach a certified copy of tatute, Section 333.02.	f	
	Attach a list of owners	s, officers and/or general and limited part	tners and their respective percentages totaling 100 percent.		
5.	Minnesota Business T (Per <i>Minnesota Statut</i>	Fax ID Number te 270C.72)	Applicant's Social Security Number		
	Federal Business Tax	ID Number			
6.	Proof of Workers' Co	mpensation Insurance Coverage:			
	Insurance company n	ame	Dates of coverage	_	
	Policy number/Self-ins	surance permit number (Per <i>Minnesota</i> S	Statute Section 176.182)	_	
	•	ave workers' compensation liability cove es covered by the law	erage because Other (Specify on the reverse side.)		
7.		a current pawnbroker, precious metal any other governmental unit?	l dealer or secondhand goods ☐ Yes ☐ No		
	If yes, indicate where	licensed:			
		Section 1	: Type of applicant		
8.	Individual If applicat	ble, complete this question and a Part II	Personal History form. Then proceed to Section 2.		
	Full name				
	Residence address _		Phone ()		
	Business address		Phone ()		
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	Full name	Percentage owned%				
		•				
	Residence address	Phone ()				
	Business address	Phone ()				
	Full name	Percentage owned%				
	Residence address	Phone ()				
	Business address	Phone ()				
	Attach a copy of the partnership agreement.					
10a.	Corporation/other organization If applicable, complete questions 8a, 8b and 8c, then proceed to Section 2.					
	Name	State of incorporation/association				
	Bloomington address	Phone ()				
	Home office address	Phone ()				
10b.	Officers of corporation/other organization A Part II Personal History form is required.	red from each officer.				
	President Full name					
	Residence address					
	Vice President Full name					
	Residence address	Phone ()				
	Secretary Full name					
	Residence address	Phone ()				
	Residence address Treasurer Full name					
10c.	Treasurer Full name	Phone ()thers, sisters or children, own or contro				
10c.	Treasurer Full name Residence address All persons who singly or together with their spouse and his/her parents, brointerest in said corporation/other organization, detailing how 100% of the busi	thers, sisters or children, own or controness is owned. A Part II Personal History t				
10c.	Treasurer Full name Residence address All persons who singly or together with their spouse and his/her parents, browninterest in said corporation/other organization, detailing how 100% of the busing is required from each individual.	Phone () thers, sisters or children, own or controness is owned. A Part II Personal History to the percentage owned				
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corporation, Certificate of Authority, as required by Minnesota Statutes, Section 303.03.

Section 2: Persons in charge of licensed premises

All applicants complete this section.

The Part II Personal History must be completed and filed with this application by each person in this section.

11.	General manager, proprietor, managing partner or any other individual or agent in charge of the licensed premises.					
	Full name	Position _				
	Residence address	Phone (_)			
	Full name	Position				
	Residence address	Phone (_)			
	Full name	Position _				
	Residence address	Phone (_)			
	Section 3: Premises					
	All applicants complete this section.					
	If the premises is planned, under construction or undergoing substantial alteration, the apa set of preliminary plans showing the proposed design. If the plans are on file with the the Department of Community Development, no additional plans need be filed.	-		•		
12. Legal description of premises to be licensed. Submit survey showing dimensions, building locations, street accelerations and location.			access, parking			
13.	How is the premises zoned under the Bloomington Zoning Ordinance?					
14.	Are any real estate taxes, personal property taxes, special assessments or other fina claims of the state, county, School District or City of Bloomington delinquent or unp the premises to be licensed? If yes, give years and unpaid amounts.		□ Yes	□ No		
	Notice: In the event a suit has commenced under Minnesota Statutes, Sections 278.01 validity of taxes, the City Council may waive strict compliance with the requirement that a waiver may be granted on taxes which remain unpaid for a period exceeding one year after	ll taxes and	assessments			
15.	Is the premises located within 500 feet of any school as defined by Section 13.01 of the City Code? This distance is measured in a straight line from the lot on which the establishment is located to the nearest point of the lot on which the school is located. In shopping centers, the distance is measured from the main entrance of the business.		□ Yes	□ No		
16.	Is the premises located within 500 feet of a City-owned athletic playfield, publicly-owned park, playfield, recreational area or open space as defined by Section 5.20 of the City Code? This distance is measured in a straight line from the lot on which the establishment is located to the nearest point of the lot on which the on which the park or playfield is located. In shopping centers, the distance is measured from the main entrance of the business.	e	□ Yes	□ No		

	Section 4: Registration					
	Applicant must attach a business plan or records to support the following.					
17.	Does applicant plan to buy secondhand goods or precious metal from the public? ☐ Yes ☐ No					
18.	Does applicant plan to sell secondhand goods or precious metal from this location to the public? ☐ Yes ☐ No					
19.	Does applicant acquire secondhand goods or precious metal exclusively from one or more of the following? ☐ Yes ☐ No (If Yes, check all that apply.) ☐ Dealer ☐ Merchant ☐ Manufacturer ☐ Wholesaler ☐ Corporate or government entity					
20.	Does secondhand goods dealer applicant conduct transactions exclusively involving the sale of goods that have been donated without compensation?					
21.	Does the secondhand goods dealer applicant conduct transactions exclusively involving the sale or receipt of the following? Yes No (If Yes, check all that apply.)					
	 □ Transactions regulated by the Federal Commodity Futures Commission Act. □ Non-antique secondhand books, magazines, postcards, stamps or philatelic material. □ Secondhand furniture sold for \$200 or more (excluding: antiques; audio, video or other electronic devices; or architectural elements, lighting fixtures or lamps). □ Secondhand cookware, glassware or eating utensils not containing precious metal. □ Secondhand clothing and shoes (excluding: leather or fur outerwear and sports apparel or equipment). □ Secondhand infant, toddler or childrens' clothing, appliances, furniture or safety devices. 					
	Notice: A single individual who conducts one or more transactions equaling \$200 or more within a 6 month period with the applicant would be reportable.					
22.	Does the precious metal dealer applicant conduct transactions exclusively involving the following? ☐ Yes ☐ No (If Yes, check all that apply.) ☐ Transactions regulated by Minnesota Statutes, Chapter 80A. ☐ Transactions involving the purchase of precious metal grindings, filings, slag, sweeps, scraps or dust from an industrial manufacturer, dental lab, dentist or agent thereof. ☐ Transactions involving the purchase of photographic film, such as lithographic and X-ray film, or silver residue or flake recovered in lithographic and X-ray film processing. ☐ Transactions involving coin with intrinsic or numismatic values not greater than its denominational value. ☐ Transactions involving gold, silver or platinum that has been assayed and is properly marked as to its weight and fineness. ☐ Transactions involving gold, silver or platinum bullion coin.					
	Notice and notarized signature					
State	data on this form will be used to approve your license. Some requested data is private. Private data is available to you and the City or a staff who need this information to perform their duties, but is not available to the public. You are not legally required to provide this, but the City may not be able to approve your license if you do not provide it.					
	re received from the City of Bloomington a copy of <i>Bloomington City Code, Chapter 14</i> (Pawnbrokers, Precious Metal Dealers, Coin ers or Secondhand Goods Dealers Ordinance) and will familiarize myself with the provisions contained within them.					
will r	clare that the information I have provided on this application is truthful and I understand that falsification of answers on this application esult in denial of the application. I authorize the City of Bloomington to investigate and make whatever inquiries that are necessary to y the information provided.					
	Applicant signature					
	Subscribed and sworn to before me, a Notary Public, on this day of 20					
	Commission expires on					

Notary signature