



## Pawnbroker License Application

Select one: (License is non-transferable)

New License: \$1115

Annual License Renewal: \$1115

### Applicant Information:

Applicant Name: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Colorado Tax ID Number: \_\_\_\_\_

FEIN Number: \_\_\_\_\_

Legal Name of business (Corp, LLC, Partnership) \_\_\_\_\_

Trade Name (DBA): \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

Mailing address if different: \_\_\_\_\_

Notes: \_\_\_\_\_

### Please read and initial below:

1. No license shall be issued by the City Clerk until the application for a license has been investigated by the Chief of Police. Each applicant shall pay a nonrefundable investigation and/or fingerprint and photograph fee at the time of application. \_\_\_\_\_
2. No license shall be issued to an applicant whose owner or manager is convicted of a felony subject to the provisions in C.R.S. 24-5-101; under the age of 18; or who has made a false, misleading or fraudulent statement on his or her application. \_\_\_\_\_
3. The Pawnbroker License must be renewed annually, and the applicant must apply for renewal 45 days before the license expiration date. \_\_\_\_\_
4. If the business is in violation of sections 12-300 through 12-304 of the Municipal Code of the City of Steamboat Springs, the applicant shall be guilty of a misdemeanor and shall be subject to punishment as authorized by the Municipal Code and his or her license may be suspended or revoked. \_\_\_\_\_

**Read Carefully Before Signing:**

Under the penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the applicant’s knowledge. Applicant agrees to operate this business according to the law and that the rights and responsibilities conferred to the license, if granted, cannot be assigned to another. Any lack of access to any portion of a licensed premise during the inspection will be deemed a refusal to permit inspection. Such refusal is grounds for the revocation of this license.

Signature: \_\_\_\_\_

Print Name and Title (Officer of Corporation/Member/Manager of LLC/Partner/Individual):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

**Department Use Only:**

License Number: \_\_\_\_\_

Date of Issuance: \_\_\_\_\_

Date License Expires: \_\_\_\_\_