



Clerk's Office
 7525 W. Greenfield Avenue
 West Allis, WI 53214
 (414) 302-8220
www.westalliswi.gov

PAWN DEALER LICENSE APPLICATION

- Licenses are valid during the period of July 1, 20__ to June 30, 20__
- A \$15 record check fee charged per person listed on the application
- All fees are non-refundable
- Cash or check only
- Section 9.15 of the Revised Municipal Code

Renewal **New**

LICENSE FEE: \$225 + BACKGROUND CHECK FEE(S) _____ = TOTAL PAID: \$ _____

Provide a bond of \$500.00 with not less than two sureties.

APPLICANT (All license information will be mailed or emailed to information provided in this section)

| | |
|---|--|
| Registered Business Name. Corporation or LLC <i>(complete Section II)</i> | |
| Registered Partnership Name <i>(complete Section II)</i> | |
| Individual <i>(complete Section I)</i> | |
| Federal Employer Identification Number (FEIN) | |
| Address of Entity | |
| E-Mail Address | |
| Phone Number | |

ABOUT THE BUSINESS:

| | |
|--|--|
| Business Name (d/b/a) | |
| Premises Address <i>(where business is being conducted)</i> | |
| Type of Good Sold | |
| Business Phone Number | |

SECTION I: INDIVIDUAL

| | |
|---|---|
| Name <i>(first, middle, last, suffix)</i> | |
| Address | |
| City and Zip | |
| Phone Number | |
| E-Mail Address | |
| Date of Birth | |
| Driver's License or State I.D. | <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> |

SECTION II: CORPORATION, LLC, OR PARTNERSHIP

(List names and addresses of all members)

| | |
|--|---|
| Name of Member <i>(first, middle, last, suffix)</i> | |
| Address | |
| City and Zip | |
| Phone Number | |
| E-Mail Address | |
| Date of Birth | |
| Driver's License or State I.D. | <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> |

| | |
|--|---|
| Name of Member <i>(first, middle, last, suffix)</i> | |
| Address | |
| City and Zip | |
| Phone Number | |
| E-Mail Address | |
| Date of Birth | |
| Driver's License or State I.D. | <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> |

Signature and Date of Applicant

Plan of Operation Form

CLERK'S OFFICE USE

| LICENSE # | Council: Granted _____ POF _____ Denied _____ | | | Issued |
|-----------|---|---------------------|-------|--------|
| | Rights to Premises (N) | BINS Inspection (N) | PPO O | |



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PLAN OF OPERATION FORM

TO BE SUBMITTED WITH THE PAWN DEALER
 LICENSE APPLICATION

In any application for a pawnbroker license, the applicant shall file a completed Plan of Operation form provided therefore by the City Clerk.

Has the information below changed since the last application?

YES - Please complete the information below.

NO 

| |
|--|
| 1. The current or planned hours of operation of the premise: |
| 2. The legal occupancy capacity of the premises: |
| 3. What plans the applicant has to insure the orderly appearance and operation of the premises with respect to noise and litter. This shall include a description of the number and location of exterior and interior trash receptacles. |
| 4. What other types of business enterprises, if any, are planned or currently conducted at the premises. |
| 5. The number of security personnel expected to be on the premises, their responsibilities, and the equipment they will use in carrying out their duties. |
| 6. The number of parking spaces on the premises. |
| 7. The number of location of security cameras, if any. |
| 8. The name of the waste/recycling company that the licensee has or plans to contract with the removal of waste and recycling. |

9. Any other reasonable information the License and Health Committee may require either for all applicants or in a particular case.

Floor Plan

In any application for a pawnbroker license, the applicant shall file a detailed floor plan on an 8 ½-inch by 11-inch sized sheet of paper for each floor of the licensed premises. The floor plan shall include:

1. Area in square feet and dimensions of the licensed premises.
2. Locations of all entrances and exits to the premises together with a description of how patrons will enter the premises.
3. Locations of all public restrooms.
4. Locations of all stairs and elevators.
5. Location of public areas and non-public areas in the premises.
6. Location of all fire extinguishers and other safety equipment.
7. Location of all refuse/recycling containers inside and outside of the premises for items that are not purchased or received by the licensee.
8. The north point and date.