



CITY OF LAKEWOOD

PAWNBROKER LICENSE

Lakewood Civic Center

It is unlawful for any person, firm, or corporation to conduct the business of pawnbroker within the city limits unless such person, firm or corporation shall have first obtained a pawnbroker's license from the City of Lakewood. All applicants for a pawnbroker's license shall file an application for such license with the City Clerk on forms to be provided by the Clerk.

ADDITIONAL DOCUMENTS REQUIRED WITH APPLICATION

- Certificate of correct zoning
- Proof of applicant's right to possession of premises
- Evidence that the corporation is in good standing under the statutes of the State of Colorado
- Foreign corporations shall provide evidence that the corporation is authorized to do business in the State of Colorado
- Insurance Policy (Refer to Section 5.24.290 SAFEKEEPING – INSURANCE)
- \$10,000 bond

CITY OF LAKEWOOD

FEE REQUIRED FOR INITIAL APPLICATION

- \$500.00 nonrefundable application fee
- \$2,500.00 nonrefundable annual license fee

TERMS OF LICENSE

The term of a Pawnbroker license is for one year from the date of issuance.

City Clerk's Office
Lakewood Civic Center
480 S. Allison Pkwy.
Lakewood, CO 80226-3127
Phone: 303-987-7080
Fax: 303-987-7088
TDD: 303-987-7057

**CITY OF LAKEWOOD, COLORADO
PAWNBROKER APPLICATION**

ALL INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected

GENERAL INFORMATION

1. Name of business: _____
2. Trade name of establishment (d/b/a): _____
3. Address of premises: _____
4. Business telephone: _____
6. Applicant is a:
- _____ Sole Proprietorship _____ Partnership
- _____ Corporation _____ Limited Liability Company

SOLE PROPRIETORSHIP INFORMATION

7. If sole proprietorship, list name, address, and date of birth of proprietor: _____
- _____
- _____
- _____

PARTNERSHIP INFORMATION

8. If partnership, list name, address, and date of birth of partners: _____
- _____
- _____
- _____

LIMITED LIABILITY INFORMATION

9. If limited liability company, list name, address, and date of birth of members and manager: _____
- _____
- _____
- _____

480 South Allison Parkway/Lakewood Colorado 80226-3127/Voice: (303) 987-7080/Fax: (303) 987-7088

ALL INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected

CORPORATION INFORMATION

10. If corporation, list name: _____

11. If corporation, list names, addresses, and dates of birth of:

President _____

Vice-President _____

Treasurer _____

Secretary _____

Director _____

Director _____

12. List all stockholders owning 10% (or more) of the issued stock:

Name	Address	Date of Birth	Position
------	---------	---------------	----------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. If stock is pledged, state name and address of person or entity to whom pledged and terms thereof. If additional space is needed, use separate sheet. Attach copies of articles of incorporation and certificate of good standing from the State of Colorado. (If new corporation, attach certificate and articles of incorporation and organizational minutes.)

12. List any other persons who have a direct or indirect financial interest in this business and the percentage of their interest: _____

13. Has the corporation, any officer, director, manager, stockholder owning or controlling 10% or more of the corporation, member, entity, or person having an interest in the business been adjudicated bankrupt, entered into a "Wage-Earner Plan" pursuant to Chapter XIII of the Federal Bankruptcy Act, or made a general assignment for the benefit of creditors during the past three years?

() Yes () No If yes, please explain on separate sheet.

14. Has a judgment based on fraud ever been entered against the applicant, manager, partner, officer, director, or stockholder?

() Yes () No If yes explain.

15. Has the applicant, manager, partner, officer, director, or stockholder ever held a pawnbroker's license?

Yes () () No If yes, complete the following.

Name of licensee: _____

Relationship to this applicant: _____

Dates licensee was held: _____

City and state where license was held: _____

16. Has the applicant, manager, partner, officer, director, or stockholder ever been denied a pawnbroker license?

() Yes () No

17. Name of person denied a license: _____

18. Relationship to this applicant: _____

19. Date of denial: _____

20. City and state where denied: _____

21. Reason for denial: _____

22. Has the applicant, manager, partner, officer, director, or stockholder ever had a pawnbroker license suspended or revoked?

() Yes () No If yes, complete the following:

Name of person with suspended or revoked license: _____

Relationship to this applicant: _____

Dates of suspension or revocation: _____

City and state of suspension or revocation: _____

Reason for suspension or revocation: _____

FINANCIAL INFORMATION

23. State purchase price and/or terms of lease: _____

24. Attach a copy of mortgage agreement, deed, or lease.

25. Cash to be invested:

By Whom	Bank & Account #	Amount-Source	Purpose
_____	_____	_____	_____
_____	_____	_____	_____

26. Complete the following on all business loans obtained. Attach copies of loan agreements

By Whom	Bank & Account #	Amount-Source	Purpose
_____	_____	_____	_____
_____	_____	_____	_____

27. List account name, bank, bank address, account number, and the names of all authorized signatories on all business accounts:

28. Is there a written management agreement: () Yes () No

29. Is there a written partnership agreement? () Yes () No

30. Attach copies of all written agreements. If there are no written agreements or contracts, a statement must be provided detailing the oral agreements.

PROPERTY INFORMATION

31. Is the building owned or leased?

32. Name and address of the owner of the building in which the premises is located:

33. Is the land owned or leased? _____

34. Name and address of the owner of the land upon which the building is located:

ALL INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected

35. Attach a copy of deed, lease, or other document showing applicant's right to possession of premises.

36. Name of applicants insurance company, agent, policy number, and effective date of policy:
