

PAWNBROKERS LICENSE APPLICATION FORM

(By-Law No. 66-94)

Licensing Office P: 519-631-1680 F: 519-633-9019

545 Talbot Street • P.O Box 520 • City Hall • St. Thomas • Ontario N5P 3V7

Year: 2017

Fee: \$100.00 per year

NON REFUNDABLE - NON TRANSFERABLE FEE

| Name of Business: | | | |
|---|----------------------------------|---|---------------|
| Business Address: | | | |
| City/Province: | Postal Code: | | |
| Bus. Phone: | Fax: | Home Phoi | ne: |
| Please state below, the loca | tion of the operation and t | he property owne | er: |
| | / | | |
| (Location) | (Contact | (Contact Person/Owner) (Telephone Number) | |
| Applicants Information: | | | |
| (Full Name) | (Cell Phone #) | | |
| Please state your mailing add | dress if different than above | : : | |
| (Street Name & Number) | (City) | | (Postal Code) |
| SIGNED | DAT | ED: | |
| If you have any questions, p If you are paying by cheque, | | | oted above. |
| OFFICE USE ONLY Copy sent to: | | | |
| Fire Department: | Chamber of Commer Police Service | ce 🗆 | |