



CITY LICENSE
(316) 268-4553

Pawnbroker, Precious Metal Dealer, Scrap Processor, Second Hand Dealer

As a new or renewal applicant, you are required to complete the application in **triplicate**. Each question and blank on the application must be filled out completely to ensure quick and timely processing. If any question or blank is not answered or filled, the application will be denied and your check will be returned to you. We will **NOT** accept incomplete applications.

Often, an applicant will leave blanks or put wrong information in the following areas:

- Middle name of the applicant (**the full middle name must be included - not just the initial**)
- On Section II, the "Residential Address" may be a P. O. Box.
- The spouse's personal information must be included regardless of whether the spouse has any involvement in the business. This information includes his/her full legal name, including the full middle name (not just the initial), and his/her date of birth;
- Lease information - the length of the lease **MUST BE FOR AT LEAST NINE (9) MONTHS**; and
- Additional information concerning any other persons holding **ANY** financial interest in the business.
- "Section II-Applicant Information" must match up with "Signature of Applicant" at the bottom of the application.

Each question on the application pertains to the applicant's ability to meet the guidelines set out by:
Charter Ordinance No. 134 which governs Secondhand Dealers, Pawnbrokers and Precious Metal Dealers; or
Chapter 3.90 which governs Scrap Processors.

By refusing or forgetting to answer a question it will be assumed that the applicant cannot meet these guidelines and will, therefore, be denied a license.

In conclusion, remember that if any information changes during the year for which your license has been issued, you must contact the License section and notify them of the change. The fees for the type of license that the applicant will be applying for are listed on the application. License fees are only refunded in the event that the initial application is denied. Licenses are non-transferable. Each location must be separately licensed.



**PAWNBROKER
PRECIOUS METAL DEALER
SCRAP PROCESSOR
SECONDHAND DEALER
LICENSE APPLICATION
COMPLETE IN TRIPLICATE**

CITY LICENSE
(316) 268-4553

Application For License As:

_____ Pawnbroker	\$500.00
_____ Precious Metal Dealer	\$150.00
_____ Secondhand Dealer	\$100.00
_____ Scrap Processor	\$200.00

Date: _____
New: _____
Renewal: _____

SECTION I - BUSINESS INFORMATION:

Business Name		Phone	
Address		Zip Code	
Mailing Address		Zip Code	
Days Open		Business Hours	

SECTION II - APPLICANT INFORMATION: The information below must be completed for the following persons:

- **The applicant;**
- **Each partner in a partnership; and**
- **Each principal stockholder in a corporation.**

Name including middle name		Home Phone	
Aliases and/or Maiden Name		Date of Birth	
Residential Address		Zip Code	
Race		Sex	
Spouse's Name include middle name		Spouse's Date of Birth	

Has any person listed on this application under Section I or Section II:

- Been convicted of or plead guilty to any felony under the Kansas Criminal Code or pursuant to the laws of any city, state or of the United States or shall have forfeited his bond to appear in Court to answer charge for any such offense within ten years immediately preceding the date of making this application? **Yes ___ No ___**
- Been convicted of or plead guilty to a misdemeanor crime of robbery, theft, forgery, burglary, consumer fraud, securing execution of a document by fraud or deception, or any other similar offense pursuant to the laws of any city, state or of the United States within ten years immediately preceding the date of making this application? **Yes ___ No ___**
- Had a license revoked for cause under the provisions of this ordinance? **Yes ___ No ___**

With the exception of any spouse listed:

- Is any person listed NOT a citizen of the United States? **Yes ___ No ___**
- Has any person listed NOT been an actual resident of the state of Kansas for at least two years immediately preceding the date of this application? **Yes ___ No ___**
- Is there any person listed on this application under the age of 21? **Yes ___ No ___**

IF THE ANSWER TO ANY OF THE ABOVE MENTIONED QUESTIONS IS "**YES**", EXPLAIN **IN DETAIL** ON A SEPARATE SHEET OF PAPER.

SECTION III - BUILDING INFORMATION: Is the location of the building where the business is located owned by the applicant? **Yes ___ No ___**

If the answer to the above mentioned question is "**NO**" complete the following information.

Length of Lease (Must be at least nine [9] months)	
Building Owner/Leasing Agent Name	
Building Owner/Leasing Agent Address include Zip	

I hereby certify that I have read and am familiar with the ordinances of the City of Wichita and with the requirements thereof as they pertain to my license. Further, under penalty of perjury, I certify that all information provided is true and accurate to the best of my knowledge.

Signature of Applicant

Date

FOR OFFICIAL USE ONLY

	Approved	Disapproved	Date
Police			
Central Inspection			

License Number		Date Issued		License Expiration	
----------------	--	-------------	--	--------------------	--