

PAWNBROKERS AND SECONDHAND DEALERS PERMIT APPLICATION

OPERATING REQUIREMENTS:

1. Hours of Operation - No pawnbroker or secondhand dealer, nor any employee thereof, shall accept any pledge, or loan any money for personal property, or purchase or receive any goods, wares or merchandise, or any article of thing, or in any manner whatsoever engage in or conduct business as a pawnbroker or secondhand dealer between the hours of 7:00 p.m. of any day and 7:00 a.m. of the following day.
2. Reporting - Every permittee shall comply with Section 21208 et seq. of the Financial Code. Any business who buys or receives as a pledge any Builders' Tools shall comply with Sections 21550 et seq. of the Business and Professions Code.
3. Disposal of Property - Every permittee under this section shall be subject to and shall comply with the requirements of state law for holding and inspection of property.
4. Minimum Age - No transactions that require reporting under Section 21628 of the Business and Professions Code shall be engaged in with any person under 18 years of age.
5. Security Plan Required. The applicant shall submit a security plan. The plan should detail systems that the tenant intends on installing to protect patrons, visitors, employees, and company property/assets on site. The plan shall address issues such as safes to be installed, alarm systems, deployment of any security personnel, funds transportation measures, hours of operation, shift personnel staffing, CCTV applications, type of loss prevention/crime prevention training provided to employees, and any other applicable measures.

PAWNBROKERS AND SECONDHAND DEALERS PERMIT APPLICATION

This Application is for (check one)

- ☐ New Permit
☐ Annual Renewal

Business Name: _____

Business Address: _____

Telephone Number and Email: _____

Business Mailing Address (if different): _____

Full description of business activity: _____

Estimated Start Date: _____

State of California Pawnbroker or Secondhand Dealers License must be attached

Security Plan attached: ☐ Yes ☐ No

OWNER INFORMATION

☐ Individual/Sole Proprietorship ☐ Partnership ☐ Corporation

Applicant Name: _____
(If a Corporation, the name shall be as set forth in its Articles of Incorporation)

Applicant's Address: _____

_____ Telephone Number: _____

Drivers License No.: _____ Date of Birth: _____

Social Security No.: _____

Age: _____ Height: _____ Weight: _____

Sex: ☐ M ☐ F Eye Color: _____ Hair Color: _____

Partnership – provide names and addresses of each general partner.

Corporations (if not publicly traded) - provide names and addresses of all directors, each executive officer, stockholders holding 10% or more of shares and an officer who is duly authorized to accept service of process.

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Prior addresses within the 12 months preceding the date of the application:

Have you ever conducted a similar business in the City or elsewhere: ☐ Yes ☐ No

If yes, provide the name of the business: _____

Within the past five years, have any of the individuals identified above been convicted in criminal proceedings or subject to pending criminal proceedings? ☐ Yes ☐ No

If yes, the applicant may attach documentation explaining any mitigating circumstances.

Emergency Contact #1: _____

Address: _____

Telephone Number: _____

Emergency Contact #2: _____

Address: _____

Telephone Number: _____

I declare under penalty of perjury that this application is true and correct to the best of my knowledge and belief.

Signature

Title

Date

OFFICE USE ONLY

Recommend ()

Not Recommended ()

Los Angeles County Sheriff's Department: _____
Signature Date

Planning Manager: _____
Signature Date