



CITY OF YONKERS LOCKSMITH LICENSE APPLICATION

20 South Broadway, 10th Floor • Yonkers, NY 10701
914-377-6808 • Email: ConsumerHelp@YonkersNY.gov

APPLICATION REQUIREMENTS

Pursuant to the provisions of the City Code of Yonkers,
All required documents must be submitted with the completed application.
Missing items will result in the delay and/or denial of the application.

1. Application signed by the applicant before a Notary Public.
2. Police Department Affidavit must be signed by the applicant before a Notary Public.
If convicted of a felony & unable to complete affidavit, attach explanation.
3. Two (2) Passport-sized Photographs taken within Thirty (30) days of application date.
4. Valid Driver's License issued by the Department of Motor Vehicles.
If you do not have a Driver's License, a NYS DMV-issued, ID Card is required.
5. Provide Five (5) Character References for Applicant.
6. Business Certificate, Partnership Certificate or Articles of Incorporation.

LICENSE FEES, TERMS AND EXPIRATION DATE

1. \$400.00 License Fee; NON-REFUNDABLE.
Payable to the City of Yonkers; *Certified/Business Check OR Money Order.*
2. \$125.00 Background Check Fee; NON-REFUNDABLE.
Payable to the City of Yonkers; **U.S. Postal Money Order ONLY**
Yonkers Police Department will conduct background check prior to license issuance.
3. License expires February 28th following date of issuance and will not be prorated or transferable.

Mayor Mike Spano
Director Kerry O'Brien Hess



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Name:		Social Security #:	
Home Address:			
City:		State:	Zip Code:
Phone/cell #: () -			
Date of Birth: / /		Driver License State:	#:
E-mail:			
Have you ever been arrested or convicted of a crime?		If yes, explain (attach sheet)	
Type of Ownership: ☐ Individual ☐ Partnership ☐ LLC ☐ Corporation ☐ Other (explain)			
Name of Company:			
DBA/Trade or Display Name:			
Business Address:			
City:		State:	Zip Code:
Business Phone Number:		Web address:	
Your Title with Company:			
CHARACTER REFERENCE INFORMATION: Provide Name, Address and Contact Number for FIVE (5) References.			
1.			
2.			
3.			
4.			
5.			
I, _____, being duly sworn, deposes and says that all of the answers in the foregoing application are true and that the photographs attached hereto were taken within thirty (30) days of the date of this application. I give my consent for the agency to conduct a background check to confirm any/all information provided herein. Sworn and subscribed to before me This ____ day of _____, 20__.			
Signature of Applicant		Date	Notary Public



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You must list EACH additional owner, partner and officer involved with the company (use additional sheets, if necessary):

*If none, initial here: _____

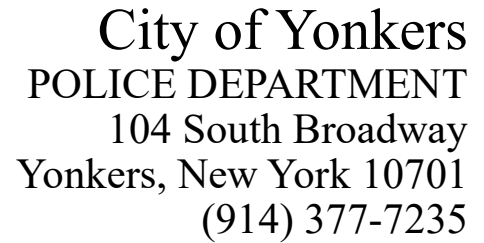
Name:	Title:	SS#:
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Home Address:		
Name:	Title:	SS#:
Home Address:		

You must list ALL unsatisfied judgments in which the applicant, partner(s) or officer(s) are named as judgment debtor (use additional sheets, if necessary):

*If none, initial here: _____

Judgment Debtor	Judgment Creditor	Disposition / Court	Date

Mayor Mike Spano
Director Kerry O'Brien Hess



STATE OF NEW YORK)
COUNTY OF WESTCHESTER) SS:
CITY OF YONKERS)

NOTARY PUBLIC