PERMIT #_____
RENEWAL_____

Town of Greece

Town Clerk's Office

Ivana Casilio, Town Clerk

One Vince Tofany Boulevard • Greece, New York 14612-5016

www.greeceny.gov

Jeffery L. McCann
Supervisor

SECONDHAND DEALER APPLICATION

Warning: The Chief of Police or his designee may deny a license to any person who makes a material misrepresentation on an application pursuant to Section 163A of the Code of the Town of Greece.

$300.00 APPLICATION FEE IS NON-REFUNDABLE

Please return the completed form along with any fees to the Greece Town Clerk

Applicant Information

Name of Business Owner/Operator: _____

Home Address: _____

Date of Birth: _____ SSN: _____

Phone Number: _____ Cellphone Number: _____

Emergency Contact Person: _____

Emergency Contact Phone Number: _____

Relationship to Applicant: _____

Business Information

Name of Business: _____

Business Address: _____

Business Phone: _____

Nature of Interest in Business (Owner, Partner, Stockholder, Member)

_____

Is business a (check one):

Corporation: _____ LLP: _____ LLC: _____ DBA: _____ Partnership: _____ Individual: _____

NOTE: If the applicant or the property owner is a partnership, corporation or DBA, please attach a separate sheet which states the name(s), home address and date of birth for all principals involved (e.g. partners, shareholders, officers, etc.) of the business.

SECONDHAND DEALER APPLICATION

Acknowledgement

Full Name of Property Owner: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ SSN: _____

Phone Number: _____ Cellphone Number: _____

"I understand that I am responsible for compliance with all applicable Federal, State, and Local Laws including all relevant sections of the Code of the Town of Greece. I further acknowledge that all the submitted information is correct."

_____
Print Name - Applicant

_____
Signature of Applicant Date

State of New York)
County of Monroe)

ON the _____day of _____, in the year _____before me, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity and that by his/her signature on this instrument, the individual or the person upon behalf of which the individual acted, executed the instrument.

Subscribed and sworn before me:
This _____day of _____, 20_____

_____
Notary Public

FOR OFFICE USE ONLY

Criminal Check: _____ Records _____ MCVB _____ Alarm CZC#_____

Applicant Check: _____ In Person _____ Telephone Game Limit _____

Documents: _____ Health Permit _____ Bonds/Ins. Appr.

Approved: _____ _____
Zoning Date

Record: _____ Approval _____ Denial CR#_____

Cart Inspection: _____ _____ Approved _____ Denied

_____ Approved _____ Denied _____ Adm. Cancelled _____ Conditionally Approved

Greece Police Department

6 Vince Tofany Boulevard
Greece, New York 14612
(585) 865-9200

SECONDHAND DEALER BACKGROUD INVESTIGATION

Section 1 – Owner Information

Business Name: _____

Owner: _____

Owner Address: _____

City: _____ State: _____ Zip Code: _____

Owner Date of Birth: _____ SSN: _____

Phone Number: _____ Cellphone Number: _____

Have you ever been convicted of a felony? _____ Yes _____ No

Have you ever been convicted of a misdemeanor _____ Yes _____ No

If yes to either, please explain:

_____

_____

_____

Have you ever been denied or had a revocation of a secondhand or similar permit from any municipality within the past six years? _____ Yes _____ No

If yes, please explain:

_____

_____

_____

Section 2 – Previous Address

Owner Address: _____

City: _____ State: _____ Zip Code: _____

Dates of Residency: From _____ To _____

Owner Address: _____

City: _____ State: _____ Zip Code: _____

Dates of Residency: From _____ To _____

Owner Address: _____

City: _____ State: _____ Zip Code: _____

Dates of Residency: From _____ To _____

Section 3 – Previous Businesses Owned or Employed By

_____ Owned _____ Employed By: Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Dates of Employment: From _____ To _____

_____ Owned _____ Employed By: Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Dates of Employment: From _____ To _____

_____ Owned _____ Employed By: Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Dates of Employment: From _____ To _____

Section 4 – Employee Information

Name: ____ Title: _________________________________

Address: ____

City: _____________________________________ State: _________________ Zip Code: __________

Date of Birth: _______________________________ SSN: ____________________________________

Phone Number: _______________________________ Cellphone Number: _______________________

Have you ever been convicted of a felony? _____ Yes _____ No

Have you ever been convicted of a misdemeanor _____ Yes _____ No

If yes to either, please explain:

____

____

Name: ____ Title: _________________________________

Address: ____

City: _____________________________________ State: _________________ Zip Code: __________

Date of Birth: _______________________________ SSN: ____________________________________

Phone Number: _______________________________ Cellphone Number: _______________________

Have you ever been convicted of a felony? _____ Yes _____ No

Have you ever been convicted of a misdemeanor _____ Yes _____ No

If yes to either, please explain:

____

____

Name: ____ Title: _________________________________

Address: ____

City: _____________________________________ State: _________________ Zip Code: __________

Date of Birth: _______________________________ SSN: ____________________________________

Phone Number: _______________________________ Cellphone Number: _______________________

Have you ever been convicted of a felony? _____ Yes _____ No

Have you ever been convicted of a misdemeanor _____ Yes _____ No

If yes to either, please explain:

____

____

Section 5 – Additional Information

Section Number:	Additional Information:
_____	_____
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_____ **Hours of Operation** – Must be between the hours of 8:00 AM and 10:00 PM

_____ **Current List of Employees** – Must be current and on file

_____ **Record Book**

CHECKLIST FOR EACH TRANSACTION

_____ Description of Item

_____ Employee Name

_____ Name and Address of Seller

_____ Seller's Date of Birth

_____ Proof of Seller's Photo Identification

_____ Actual Price Paid

_____ Date of Transaction

_____ Method of Payment

Greece Police Department **Secondhand Dealer Background Investigation**

Instructions for Fingerprinting at an L-1 Enrollment Services Live Scan Location **ORI# NY0275400**

1. Provide the applicant with the ORI number assigned to your agency. The appointment scheduling process requires the applicant to provide the correct ORI number. If you do not know your ORI number, it can be found by logging into www.ejustice.ny.gov clicking on "Message Services", and then clicking on "Civil In-Box". The ORI number will be displayed at the top of the screen (3rd line down).

2. Provide the applicant with the correct "Fingerprint Reason" that they should select when they make their appointment. If you do not know your current authorized job/license types for which your agency can submit a fingerprint for processing, please contact DCJS so that you can instruct your applicants appropriately.

3. If your agency assigns a unique identifying number to the individual (license number, case number, ID number, etc.) provide the applicant with the appropriate "Agency ID number" that you want them to enter/provide when they schedule their fingerprinting appointment. If your agency does not need a unique Agency ID number, you may disregard this step.

4. Direct the applicant to schedule an appointment for fingerprinting by going to the www.L1enrollment.com website or calling the L-1 toll free call center at (877) 472-6915. Appointment scheduling via the website is available 24/7/365. Appointment scheduling via the call center is available 9 AM – 9 PM Monday through Saturday.

5. If the applicant schedules their appointment though the L-1 website, recommend that they print out the confirmation page and bring it with them to their appointment.

6. The applicant will select the most convenient location to get fingerprinted as part of making their appointment. A list of available locations can be found at www.L1enrollment.com . Select "NY" and then click on "Locations" to view the listing.

7. Payment Methods: Payment options include personal or business check, government check, certified check, bank check, money order, credit card or L-1 escrow account. Payment made to "L-1 Enrollment Services". (NOTE: Credit cards are not accepted on-site at the fingerprinting location; a credit card may only be used at the time of scheduling the fingerprinting appointment). Should your office desire to enter into an account arrangement with L-1, information regarding escrow account arrangements may be found by logging onto www.L-1enrollment.com . Select "NY" and then click on "Forms and Links".

8. Fingerprinting Fees: The fingerprinting fee will be comprised of the total fingerprint search fee(s) plus the L-1 vendor fee. The total fee is made to L-1 Enrollment Services. Fees are as follows:

The DCJS fingerprint search fee	$75.00
The FBI fingerprint search fee	$19.25
The L-1 vendor fee	$11.50

If your agency is authorized to submit an FBI card for a particular job/license type and an FBI fee is required. The FBI fingerprint search fee is waived for criminal justice employment.

The L-1 vendor fee relates to the software, equipment, and staffing costs in connection with the services they are providing to capture and transmit the electronic fingerprint submission. The fee is assessed twice per year and can change on January 1 and July 1 of each year. The highest level it can be set at is $11.75. As more input comes through the L1 network, the fee may increase or decrease.

9. The applicant will go to the fingerprinting location and bring two (2) forms of identification, at least one of which must have a photo. When they schedule their appointment, they will be given the options of what forms of identification are considered acceptable. Such options include driver's license, US Passport, Social Security Card, etc.

10. If they did not already pay on-line when they scheduled their appointment, they will also need to bring their payment to the fingerprinting appointment.

11. At the fingerprinting location, the identification documents will be reviewed, fingerprints rolled, and photo taken. Once the applicant has been fingerprinted, L-1 immediately launches the fingerprint transaction and photo to DCJS for processing.

12. The applicant will be provided two receipts indicating the applicant's name, fingerprinting site, location, date and time, fee paid and reason for fingerprinting. You may choose to request that the applicant provide one of those receipts to your agency and retain the other copy for their records.

13. Upon completion of the DCJS fingerprint search process, the DCJS response will be delivered electronically to your "eJustice - Civil In-Box. The FBI print (if authorized for FBI search) will then be launched from DCJS to the FBI electronically (the FBI will not search their files until the state completes their search process). Upon completion, the FBI response will be delivered electronically to your "eJustice Civil In-Box". Typically, electronic fingerprint responses are delivered in a 24- to 72-hour timeframe.

Should either DCJS or the FBI reject a transaction due to image quality reasons, L-1 will contact the applicant and advise him/her that they must schedule an appointment for reprinting. There is no additional cost that will be charged for reprinting. There will be a small percentage of the population (3-5%) that have difficulties in providing a good set of prints due to the quality of their skin/fingerprint ridges.

If you have an applicant who has been rejected multiple times by DCJS, please contact DCJS for assistance at (800)262-3257 and ask to speak to someone in the Civil Identification Bureau. Our staff is willing to review the most recent transmission and determine if we can accept the transaction for processing, taking into consideration any additional information you may be able to provide to indicate that a better set of prints may not be obtainable.

In the case of FBI rejections, the FBU will require two fingerprint submissions before they will consider conducting a name search. Should your agency receive two rejections for an applicant, a name search request can be made directly to the FBI through the submission of a CJIS Name Check Request Form. Name search requests to the FBI must be made within 90 days of the last FBI rejection. To obtain a CJIS Name Check Request Form, you can go to www.fbi.gov click on "Learn About Us" then click on "Fingerprints" and finally, click on "Name Checks for Fingerprint Submissions".