



100 Parkers Mill • Oswego, IL 60543  
Phone: (630) 554-3259  
Website: www.oswego-il.org  
Email: license@oswego-il.org

**APPLICATION FOR PAWN BROKERS & SECOND HAND DEALERS**

Please return completed Application and Fee to Village Clerk

*License Period: January 1 through December 31*

- Pawnbroker & Second Hand Dealer License Fee: \$200 per year. LICENSE BOND for \$1,000 MUST accompany completed application
- The Owner/Manager of the establishment MUST complete and SIGN this application. ALL items MUST be completed. If not applicable, enter "N/A" on the line. Incomplete applications may be returned and will not be processed until completed. If additional space is needed please utilize a separate sheet of paper.
- This license is not transferable to other location(s) or owner(s) other than that listed below.
- This license MUST be posted in public view at the location of the business(s).

**Business Information**

1. Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

2. Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Location for which the license is requested: \_\_\_\_\_

Character of Business (Principle Business Activity) or objectives for corporation: \_\_\_\_\_

Length of time the Applicant has been in a business of this character: \_\_\_\_\_

3. Name of Building Owner: \_\_\_\_\_

Address of Building Owner: \_\_\_\_\_

Mailing Address of Building Owner (if different): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**\*\*\* OFFICE USE ONLY \*\*\***

Approved     Not Approved    License No.: \_\_\_\_\_    Date of Issuance: \_\_\_\_\_  
 Background Check     \$1000 License & Permit Bond    Application Fees: \$200.00  
 Received Copy of Ordinance (Hard Copy or Electronically)    Date Received: \_\_\_\_\_

## APPLICANT Information

4. Applicant Name: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ M/F: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Are you a Sole Proprietor?  Yes  No **If yes, skip to Question 9**

## BUSINESS OWNERSHIP Information

Please provide the following information regarding how the business was created and is owned:

Corporation  Partnership  Limited Liability Corporation (LLC)

5. Business Owner Name: \_\_\_\_\_

Business Owner Address: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

Contact person: \_\_\_\_\_ Telephone number: \_\_\_\_\_

Date of Incorporation and objects for which corporation was incorporated: \_\_\_\_\_

\_\_\_\_\_

6. If the majority interest of said corporation/partnership/membership is owned by one (1) person or his nominees, please provide the full name and address:

Name \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ M/F: \_\_\_\_\_ Citizenship: \_\_\_\_\_

7. Full name and address of all partners/shareholders/members and list principal business activity of each partner. If a naturalized citizen, please list the date and place of naturalization.

(a) \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ M/F: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Principal Business Activity: \_\_\_\_\_



10. Have you, or in the case of a corporation the local manager, or in the case of partnership any of the partners, ever held a license or had interest in a license issued by the Village of Oswego or any other jurisdiction regulating the purchase or sale of used property been revoked for cause?

Yes  No  If yes, please provide a list of revocations with date and jurisdiction.

Revocation:	Date:	Jurisdiction
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_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners ever made application for a similar or other license on premises other than described in this application?

Yes  No  Disposition: \_\_\_\_\_

12. Will you report/upload to the Village's electronic reporting system each day before 12:00 PM, the listed information for each transaction conducted?

Yes  No

13. Will you familiarize yourself with all the laws of the United States, State of Illinois, and ordinances of the Village of Oswego, pertaining to the purchase or sale of used property and abide by all of them?

Yes  No

14. Will you maintain your premises in a clean and sanitary manner free from conditions that might cause accidents?

Yes  No

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**Continue to signature page**

**SIGNATURE/TITLE/DATE**

Please sign and date the application and provide your title with the business. The application must be signed by an owner, officer or partner.

I UNDERSTAND ANY MISREPRESENTATIONS SUBMITTED MAY BE CAUSE FOR DENIAL AND REVOCATION OF THE LICENSE. THE UNDERSIGNED DOES HEREBY SWEAR OR AFFIRM, UNDER PENALTIES OF PERJURY, THAT ALL STATEMENTS IN THE FOREGOING APPLICATION ARE TRUE AND CORRECT; THEY ARE MADE UPON MY PERSONAL KNOWLEDGE AND INFORMATION AND THAT I HAVE PERSONALLY READ EACH AND EVERY QUESTION AND ANSWERED EACH AND EVERY QUESTION IN THIS APPLICATION; THEY ARE MADE FOR THE PURPOSE OF REQUESTING THE VILLAGE OF OSWEGO TO ISSUE THE LICENSE HEREIN APPLIED FOR; AND THAT THE PERSON OR PERSONS APPLYING FOR SUCH LICENSE ARE ALL OF GOOD MORAL CHARACTER AND HAVE NOT BEEN CONVICTED OF A FELONY; THAT IF A LICENSE IS GRANTED HEREUNDER, THE UNDERSIGNED WILL REVIEW AND NOT VIOLATE ANY OF THE LAWS OF THE UNITED STATES OF AMERICA, THE STATE OF ILLINOIS, THE VILLAGE OF OSWEGO, RULES AND REGULATIONS AND THE CIVIL RIGHTS SECTIONS THEREOF AND IS NOT DISQUALIFIED BY REASON OF ANY MATTER OR THING CONTAINED IN THIS DOCUMENT.

**PENALTY:** Any person found liable/guilty by a preponderance of the evidence of a violation of Village Code, relating to this licensing, in an administrative/judicial hearing shall be subject to a class IV fine, plus applicable hearing costs, as provided in subsection 1-4-3G of this code.

Printed Name: \_\_\_\_\_  
*(Please print clearly)*

Signed: \_\_\_\_\_  
*(Authorized Signature)*

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**CONSENT TO CONDUCT BACKGROUND CHECK**

**TO WHOM IT MAY CONCERN**

I authorize and empower the Village of Oswego and its agents, employees or representatives to obtain and use all information relating to my previous and current employment, education, military record, criminal conviction history, personal characteristics, credit history, and all other information which may bear favorably or unfavorably upon my application for a Pawnbroker & Secondhand Dealer license made to the Village of Oswego. I further release from liability any person or persons providing or receiving any such information in connection with this pre-licensure investigation.

Upon written request I understand that said Police Department will provide me with information regarding the scope of the investigation if one was/is made.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_