

APPLICATION FOR PRECIOUS METALS DEALER PERMIT
[G.S. § 66-407(a)]

Name of business: _____

Address of business: _____

Full name of applicant: _____ Date of birth: _____

Current address: _____

All addresses of applicant for previous five years: _____

Any names used by applicant, in the last five years, other than that given above:

Physical description: Race: _____ Color of eyes: _____
 Height: _____ Color of hair: _____
 Weight: _____

Distinguishing marks or characteristics: _____

Drivers license number/state of issue: _____

List all felony convictions in any state or federal court: _____

List all other criminal convictions in any state or federal court during the past five years, excluding minor traffic violations: _____

Form of business (check one):

_____ Individual _____ Partnership _____ Association or corporation

If partnership, association or corporation:

(a) List name and current address of all Officers, Directors of the corporation and all persons owning 10% or more of the stock in the corporation or interest in the partnership or association: [Note: all persons listed must complete the Co-Owner Supplemental Information Form.]

Names	Addresses
_____	_____
_____	_____
_____	_____
_____	_____

(b) List all other names and addresses used now or in the past five years by the partnership, association or corporation:

Names	Addresses
_____	_____
_____	_____
_____	_____
_____	_____

(c) _____ A supplementary information sheet is attached for each person listed in subsection (a) above.

List names of all current employees: _____

Photograph: _____ A recent photograph or copy of driver's license or ID card is attached (approved by law enforcement agency to which application is submitted), OR

_____ I request that the law enforcement agency photograph me for this application.

Fingerprints: _____ A full set of fingerprints is attached. (The applicant should contact the law enforcement agency issuing the permit about being fingerprinted.)

This application is for: _____ regular permit
_____ special occasion permit

I propose to meet the bond or trust requirements of G.S. 66-409 by:

_____ Posting a cash bond _____ Establishing a trust account
_____ Posting a surety bond

Signature of applicant: _____

Sworn to and subscribed before me this

the _____ day of _____, 20_____.

Notary Public

My commission expires: _____

-----FOR LAW ENFORCEMENT AGENCY USE ONLY-----

\$180.00 Annual fee received: _____ day of _____, 20____; Check No. _____
Amount: \$_____.00.

SBI Fingerprint check fee in the amount of \$_____.00; Check No. _____

A copy of the Security Bond was received on _____ day of _____, 20_____.

Date and time application filed: _____, 20____, _____ am/pm

APPLICATION APPROVED BY: _____

Name of Law Enforcement Agency: _____