

Pawnbroker/Second Hand Dealer License Application
Bristol Police Department
230 Lake Street
Bristol, NH 03222
(603) 744-6320

Applicant Information

Name _____ Date of Application _____
Street _____ Driver's License No. _____
City/Town _____ State _____ Zip _____
Date of Birth _____ Place of Birth _____
Height _____ Weight _____ Hair _____ Eyes _____ Sex _____

I have previously obtained a Pawnbroker/Second Hand Dealer License #
_____ issued on _____ by _____.

I have had a Pawnbroker/Second Hand Dealer License **REVOKED/SUSPENDED**. If
so, please include the date it was revoked, the reason and the original issuing agency.
_____ revoked/suspended on _____ by _____
Reason: _____.

Company Information

Company Name _____
Company Address _____
Company Phone Number _____
Owner's Name _____ Title _____
Owner's Home Address _____

Employees

*Note: This application **MUST** include all personal identifying information for all persons
operating or intending to operate under this license. If additional space is needed, please
include additional employees on the back of this application.*

1.) Name _____ Occupation _____
Street _____ Driver's License No. _____
City/Town _____ State _____ Zip _____
Date of Birth _____ Place of Birth _____
Height _____ Weight _____ Hair _____ Eyes _____ Sex _____

2.) Name _____ Occupation _____
Street _____ Driver's License No. _____
City/Town _____ State _____ Zip _____
Date of Birth _____ Place of Birth _____
Height _____ Weight _____ Hair _____ Eyes _____ Sex _____

3.) Name _____ Occupation _____
Street _____ Driver's License No. _____
City/Town _____ State _____ Zip _____
Date of Birth _____ Place of Birth _____
Height _____ Weight _____ Hair _____ Eyes _____ Sex _____

4.) Name _____ Occupation _____
Street _____ Driver's License No. _____
City/Town _____ State _____ Zip _____
Date of Birth _____ Place of Birth _____
Height _____ Weight _____ Hair _____ Eyes _____ Sex _____

5.) Name _____ Occupation _____
Street _____ Driver's License No. _____
City/Town _____ State _____ Zip _____
Date of Birth _____ Place of Birth _____
Height _____ Weight _____ Hair _____ Eyes _____ Sex _____

Merchandise Information

Type of Merchandise you intend to deal in:

I have annotated below all of my motor vehicle offenses and criminal convictions and that of all employees that are employed by me or intending to operate under this license.
Note: All additional motor vehicle offenses and criminal convictions should be listed on the back of this application.

Motor Vehicle Offenses

<u>Date</u>	<u>Offense</u>	<u>Employee Name</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Criminal History

<u>Date</u>	<u>Offense</u>	<u>Employee Name</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby swear that the information stated above is true to the best of my knowledge, under the penalties of law, including False Swearing, pursuant to N.H. RSA § 641:2.

Date

Signature

Date

Justice of the Peace