



**HARFORD COUNTY GOVERNMENT**  
 Department of Inspections, Licenses and Permits  
 220 South Main Street  
 Bel Air, Maryland 21014  
 410-638-3305

<b>FOR OFFICE USE ONLY</b>	
License No.	_____
Application Fee	\$100.00 _____
Application Date	_____
Expiration Date	06/30/ _____
New	_____ Renewal _____

**PAWNBROKER LICENSE APPLICATION**

**BUSINESS INFORMATION**

Business Name: \_\_\_\_\_

Business Type:    Corporation                       LLC                       Non-Profit                       Sole Proprietor

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

City:	State:	ZIP Code:
Phone:	E-mail:	Website

**OWNER INFORMATION**

Name: (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Home address: \_\_\_\_\_

City:	State	ZIP Code:		
Phone:	Mobile Phone:	E-mail:		
DOB:	Height:	Weight:	Hair color:	Eye color:
Driver's License No.	State			

**CO-OWNER INFORMATION**

Name: (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Home address: \_\_\_\_\_

City:	State	ZIP Code:		
Phone:	Mobile Phone:	E-mail:		
DOB:	Height:	Weight:	Hair color:	Eye color:
Driver's License No.:	State			

.....**FOR OFFICE USE ONLY**.....

Sheriff's Office Recommendation: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Approved By: \_\_\_\_\_

If Disapproved – Reason \_\_\_\_\_

\_\_\_\_\_

**Harford County Government  
Department of Inspections, Licenses and Permits  
Pawnbroker License Application**

The following questions pertain to OWNER and CO-OWNER:

1. Have you ever been convicted of a felony, crime of theft or moral turpitude?

OWNER \_\_\_\_\_ CO-OWNER \_\_\_\_\_

If yes give particulars: Date, place and nature of conviction (use additional paper if needed)

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2. Have you ever had a permit or license of this type suspended, revoked or refused in this or any state?

OWNER \_\_\_\_\_ CO-OWNER \_\_\_\_\_

If yes give particulars: Date, place and nature of suspension, revocation or refusal (use additional paper if needed)

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3. Please list each employees name and address on page provided (see page 3).

4. Please attach a copy of the Zoning Permit and or Use and Occupancy Certificate.

I understand that if I knowingly make a misrepresentation or false statement on this application, I am guilty of a misdemeanor and, upon conviction, may be subject to a fine not exceeding One Thousand dollars (\$1,000.00) or imprisonment not exceeding ninety (90) calendar days or both, as defined in Chapter 1, §1-22, of the Harford County Code.

In consideration of the granting of this license, I agree that I will conform to and abide by all the rules and regulations of the Department of Inspections, Licenses and Permits and in accordance with the Harford County Code, Chapter 188, Pawnbrokers, as amended.

BY SIGNING AND SUBMITTING THIS APPLICATION, I ATTEST THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

\_\_\_\_\_  
PRINT NAME (OWNER)

\_\_\_\_\_  
PRINT NAME (CO-OWNER)

\_\_\_\_\_  
SIGNATURE (OWNER)

\_\_\_\_\_  
SIGNATURE (CO-OWNER)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

**Harford County Government  
Department of Inspections, Licenses and Permits  
Pawnbroker License Application**

Please list below each employee, giving name, address and date of birth.

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_

4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_

5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_

6. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_

7. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date of Birth \_\_\_\_\_