

**CITY OF STERLING HEIGHTS  
PAWBROKERS LICENSE**

**SUBMIT TO: CITY CLERK**  
CITY OF STERLING HEIGHTS  
40555 UTICA ROAD  
P.O. BOX 8009  
STERLING HEIGHTS, MI 48311-8009

**Applicant Information:**

Full Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Michigan Driver's License No. \_\_\_\_\_

Sex \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Color of Hair \_\_\_\_\_ Color of Eyes \_\_\_\_\_

Age \_\_\_\_\_ U.S. Citizen? \_\_\_\_\_ Naturalized?(number and place) \_\_\_\_\_

Marital Status \_\_\_\_\_ Michigan Resident? \_\_\_\_\_ How Long? \_\_\_\_\_

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

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

Telephone No. \_\_\_\_\_

Attach a copy of the lease or deed for the proposed business location.

**Employment (past 10 years)**

<u>Occupation</u>	<u>Name &amp; Address of Employer</u>	<u>Supervisor</u>	<u>From</u>	<u>To</u>
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Residence (past 10 years)

Address	City and State	From	To

Have you ever had your name legally changed? \_\_\_\_\_ Have you ever used a name other than the one you now use? \_\_\_\_\_ If so, give former name(s) \_\_\_\_\_

Have you ever been arrested? (This means any arrest regardless of whether or not you were convicted) \_\_\_\_\_ Have you ever been convicted? \_\_\_\_\_

Give a complete record of all arrests and convictions, including dates and places:


Give the following information for the business proprietor, partners and persons with an interest in the business to be licensed. If incorporated, give same information for officers, directors and managerial employees:

Name	Address	Nature of interest in business or official position	Citizen of U.S. Answer Yes or No

Full names and addresses of all persons to be employed in the operation of the business:


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I, \_\_\_\_\_, do hereby solemnly swear or affirm that all statements contained in this application are true and correct to the best of my knowledge, information and belief. I also swear that I have read and understand that I must keep records and provide reports to the Sterling Heights Police Department as required by state law and set forth in copy of Act 273 of 1917 attached.

Signature of Applicant \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
County, Michigan

My commission expires: \_\_\_\_\_

CITY OF STERLING HEIGHTS

TO ANY PERSON PRESENTED WITH THIS AUTHORIZATION BY AN AGENT OF THE  
CITY OF STERLING HEIGHTS.

You, and any person associated with you, are hereby authorized to give to the City of Sterling Heights, or any representative thereof, any and all information which may be requested regarding my employment, bank accounts, stock and bond accounts, other financial matters, my physical condition, and, if necessary, to allow them to examine any records which you may have concerning myself.

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SIGNATURE

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TYPE OR PRINT NAME

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
County, Michigan

My commission expires: \_\_\_\_\_

**AUTHORIZATION TO INSPECT PREMISES**

I authorize the City of Sterling Heights to conduct any inspections it considers necessary to determine compliance with codes, ordinances and laws applicable to:

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(ADDRESS OF BUSINESS)

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SIGNATURE

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TYPE OR PRINT NAME

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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Notary Public

\_\_\_\_\_ County, Michigan

My commission expires: \_\_\_\_\_

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I recognize and acknowledge that the City of Sterling Heights has the right and the authority to adopt an ordinance and/or other regulations that govern pawnbrokers and pawn shops. I hereby agree that a license granted by the City of Sterling Heights under state law authority does not vest or create any "grandfather" rights, and I further understand that my license and business will be subject to any ordinance or other regulations properly adopted by the City of Sterling Heights after the date of this application. I hereby waive any argument, claim or cause of action that is in any way based upon a grandfathering theory and I agree to be subject to all future City of Sterling Heights ordinances and regulations.

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SIGNATURE

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TYPE OR PRINT NAME

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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Notary Public

\_\_\_\_\_ County, Michigan

My commission expires: \_\_\_\_\_

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This affidavit is to attest that I have never been convicted, pled guilty or no contest to a felony or moral turpitude nor have I been convicted of any other criminal act. I have never been convicted, pled guilty or no contest to a violation of state or local law relating to a pawnbroker business or the services performed therein, and have never had a license or permit to operate a pawnbroker business denied, suspended or revoked.

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Print Name

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Sign Name

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Date

**Documents which must be attached to this application:**

The applicant shall pay to the treasurer of the governmental unit an annual license fee in the amount of **\$500.00**.

Bond in the name of the City of Sterling Heights in the sum of \$3,000.00 with at least 2 sureties, conditioned for the faithful performance of the duties and obligations pertaining to the conduct of the business and for the payment of all costs and damages incurred by any violation of this act. The bond is subject to approval of the City of Sterling Heights.

Copy of applicant's Michigan Driver's license.

Copy of lease or deed for proposed location.

**Approval must be obtained from the following departments before issuance of license:**

Building Department Approval, date: \_\_\_\_\_

Fire Department Approval, date: \_\_\_\_\_

Police Department Approval, date: \_\_\_\_\_

Planning/Zoning Department Approval, date: \_\_\_\_\_

Date License issued \_\_\_\_\_

Notification to departments when license has been issued

License No: \_\_\_\_\_

License Expiration Date (one year from issuance): \_\_\_\_\_

Issued by: \_\_\_\_\_

Approved by: \_\_\_\_\_