

OAK PARK

14000 Oak Park Blvd., Oak Park, MI 48237 • (248) 691-7400 • www.OakParkMI.gov

Dealer in Precious Metals, Gems and Other Precious Items Application

I hereby apply for a precious metals license in accordance with the code of ordinances of the City of Oak Park.
(Applications must be filed with the City Clerk not less than 30 days prior to the time a license is issued/renewed)

New **Renewal**

Name of applicant: _____

Applicant's address: _____

Applicant's driver's license number: _____

Business name: _____ Phone number: _____

Business address: _____

Email address: _____

Nature of business: _____

Number of employees: _____

Hours of operation: _____

Zoning classification for this business location is: _____

I certify that this is the proper zoning to conduct this type of business.

Applicant's thumb print

Date taken: _____

Date of birth /race/sex: _____

Print of: Right thumb Left thumb

Signature of officer taking print

Indicate one:

Individual

Partnership

Corporation

LLC (Limited Liability Company)

Check one:

Articles of Incorporation attached

Assumed Name Certificate attached

(Cont.)

Note: Separate application for each business location is required

I _____, under penalty of perjury, state that the above information is true, and that I
(print name)

have read the provisions of Act 95 of the Public Acts of 1981 and understand them, and that I have informed my agents and employees, and will immediately inform all new agents and employees, of the provisions of said Act. Further, under penalties of perjury I state that neither I nor any of my agents or employees have been convicted of a felony under Act No. 328 of the Public Acts of 1931, as amended, within the five-year period preceding the date of the application, or convicted of a misdemeanor under said laws within a one-year period preceding the date of this application.

Signature of applicant: _____ Date: _____
Applicant name: _____ Address: _____

Additional Employees

Name Address: Driver's License / ID#: Change date

Thumb prints of additional employees (to be taken by the Public Safety Department):

Applicant's thumb print

Date taken: _____

Date of birth/race/sex: _____

Print of: Right thumb Left thumb

Signature of officer taking print

Applicant's thumb print

Date taken: _____

Date of birth /race/sex: _____

Print of: Right thumb Left thumb

Signature of officer taking print

Applicant's thumb print

Date taken: _____

Date of birth /race/sex: _____

Print of: Right thumb Left thumb

Signature of officer taking print

Internal Office Use Only

Precious metals license number _____ Date issued: _____

Public Safety approval: Yes No Public Safety signoff: _____

City Clerk's Office approval: Yes No City Clerk's Office signoff: _____