CHECKLIST
PAWNBROKERS LICENSES

APPLICANT TO SUBMIT TO THE CITY CLERK’S OFFICE:

_______ COMPLETED APPLICATION

_______ FEE OF $500 ANNUALLY. - COPY RECEIPT FOR FILE

_______ 1 SURETY BOND IN THE AMOUNT OF $3,000.00, per State Act 273 of 1917, Section 446.202 (4)

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▪ LICENSE IS GOOD FOR A PERIOD OF 1 YEAR FROM THE DATE OF ISSUANCE

▪ IF LICENSE REVOKED THE SAME PERSON/BUSINESS MAY NOT RECEIVE ANOTHER LICENSE FOR A PERIOD OF ONE YEAR.

▪ PER STATE ACT - MAY NOT BE OPENED ON SUNDAYS

▪ REQUIRED TO SUBMIT SPECIFIC REPORTS TO POLICE DEPT DAILY PER STATE ACT.

▪ ENFORCED THROUGH LOCAL POLICE DEPT
License, if granted, valid for one year.  
(Note: Separate application for each place of operation required)  

Fee: ($500)

CITY OF FARMINGTON HILLS  
APPLICATION FOR PAWN BROKER LICENSE

Date ____________________

Name of Business: ____________________________________________________________

Provide One:  ☐ Articles of Incorporation (attached)  
☐ Assumed Name Certificate (attached) 

Business Address: _____________________________________________________________

Business Telephone: ________________  Business Facsimile: _________________________

Business Days/Hours: _________________________________________________________

Name of Applicant: __________________________________________________________

Home Address: _______________________________________________________________

Home Telephone: ________________  Home Facsimile: _________________________

Driver’s License No. __________________________________________________________
*Attach copy of Driver’s License to application

EMPLOYEES:

1. Name _____________________________  Birthdate _______________________
   (First)            (Middle)             (Last)
   Home Address ____________________________  D.L. # _______________________
   City_____________ State_____ Zip.  Home Phone _______________________

2. Name _____________________________  Birthdate _______________________
   (First)            (Middle)             (Last)
   Home Address ____________________________  D.L. # _______________________
   City_____________ State_____ Zip.  Home Phone _______________________
   (Attach separate sheet, if needed)

I, ____________________________, under penalty of perjury, state that the above information is true
and that I have read the provisions of Act 273 of the Public Acts of 1917 attached 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.

__________________________________________
Signature of Applicant

__________________________
FOR OFFICE USE ONLY

ROUTED:  Date:
Planning
Police Dept

RECEIVED:  □ APPROVED
Application  ____________
Fee  ____________
Surety Bond ( in the amt. of $3,000)  ____________  □ DENIED

(Return to Farmington Hills City Clerk, 31555 W. Eleven Mile Rd., Farmington Hills, MI 48336)