



Application for Pawnshop License

- The Forsyth County Pawnshop and Pawnbroker Ordinance is available at www.forsythco.com. The document is located on the Business License sub-department page, which you will find under the Planning Department. The document is also available for review in the Department of Planning and Community Development.
- Submit completed applications to:

Forsyth County Department of Planning and Community Development
Business License Division
110 East Main Street, Suite 100
Cumming, GA 30040

- Following the submittal of your application, applicants are required to visit the Forsyth County Sheriff's Office to submit fingerprints and authorize a criminal history background check. The Sheriff's Office will provide you a criminal background report; you must return this document to the Department of Planning and Community Development. For the purposes of this requirement, the following individuals are considered applicants:
 - Sole Proprietor: The sole proprietor.
 - Partnership: Each partner/member.
 - Corporation: The majority stockholder and each principal officer.
- For questions related to the Forsyth County Pawnshop and Pawnbroker Ordinance:

Amy Konrath, Business License Manager
770-886-2830
AJKonrath@forsythco.com

Section 1: Application Type

- 1) Include a certified or cashier's check made payable to Forsyth County for the \$250 investigative fee.
 - 2) If operating under a trade name (DBA), provide the trade name (DBA).
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- 3) Complete item 3a if the applicant is a sole proprietor.
 - a) Provide the name of the sole proprietor (this person will be the named licensee and must complete Sections II through VI of this application):
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- 4) Complete items 4a through 4e if the applicant is a partnership (this includes LLCs and their members).
 - a) Provide the name and address of the partnership:
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- b) Provide the name of one of the individual partners/members who shall serve as the named licensee (this person must complete Sections II through VI of their application):
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- c) List the name of each partner / member:
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- d) Each partner/member is considered an applicant and shall individually complete Sections IV through VI of this application. Print additional copies of these sections for each applicant identified in question 4c.

- e) Include a copy the partnership/operating agreement, including any amendments.

- 5) Complete items 5a through 5e if the applicant is a corporation.

- a) Provide the name and address of the corporation:
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b) Provide the name of the majority stockholder or principal officer that will be the named licensee (this person must complete Sections II through VI of this application):

c) List the names of the majority stockholder and each principal officer:

d) The majority stockholder and each principal officer of the corporation are considered an applicant and shall individually complete Sections IV through VI of this application. Print additional copies of these sections for each applicant identified in question 5c.

e) Include a copy of the Articles of Incorporation and By-Laws, including any amendments.

Section II: Proposed Location

6) Provide the address of the proposed establishment:

7) All applications shall provide a site plan of the property that includes the location and type of structures; the location and number of parking spaces; sidewalks; patios; and vehicle ingress and egress points.

Section III: Registered Agent Verification

8) Name of registered agent:

9) Address of registered agent:

10) Phone number of registered agent:

11) Registered Agent Verification:

I solemnly swear that the foregoing statements are true and complete. I understand that any falsehoods are grounds for automatic rejection of this application.

I solemnly swear that the foregoing statements are true and complete. I understand that any falsehoods are grounds for automatic rejection of this application.

Name (Print)

Signature

Sworn to and subscribed before me this _____ day of _____, 201_____.

Notary Public

Section IV: Applicant Statement

12) I have read and understand the Forsyth County Pawnshop and Pawnbroker Ordinance: [YES] or [NO]

13) I understand that, if a license is granted, I must maintain a copy of the Forsyth County Pawnshop and Pawn Broker Ordinance on the licensed premises: [YES] or [NO]

14) Within 14 days of submitting this application I will visit the Forsyth County Sheriff's Office to furnish a complete set of fingerprints and initiate the criminal history record check: [YES] or [NO]

15) Full Name:

16) Date of Birth:

17) Phone Number:

18) E-mail Address: *(required for named licensee only)*

19) Address:

20) Resident of : _____ County, State of : _____

21) Are you a citizen of the United States: [YES] or [NO]

22) Have you, or your spouse, been convicted under any federal, state or local law of a felony within five years immediately prior to the filing of this application: [YES] or [NO]

a) If YES to question 22, provide detail of conviction including date and location:

23) Are you in compliance with all federal, state and local regulations including, but not limited to payment of County taxes, fees and assessments: [YES] or [NO]

24) Have you been denied under the provisions of this Ordinance for the same type of license in the last 12 months: [YES] or [NO]

25) Have you or any partner, majority stockholder, principal officer, member, or other principal been associated with any business that has had any pawnshop license issued by any county, municipality or other governmental subdivision suspended or revoked: [YES] or [NO]

Section IV: Application Certification

Application must be sworn to and signed by the applicant(s) in the presence of a notary public or other office authorized to administer oaths. Any misstatement or concealment of fact in the application shall be grounds for denying a license, and shall make the applicant liable to prosecution for perjury under the laws of the State of Georgia.

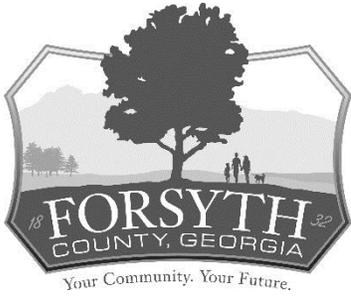
I solemnly swear that the foregoing statements are true and complete. I understand that any falsehoods are grounds for automatic rejection of this application.

Name (Print)

Signature

Sworn to and subscribed before me this _____ day of _____, 201_____.

Notary Public



**Affidavit Verifying Residency Status of an Applicant
as Required by the Georgia Security and Immigration Compliance Act
O.C.G.A. § 50-36-1(e)(2) Affidavit**

By executing this affidavit under oath, as an applicant for a Forsyth County, Georgia Alcohol License, or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for a Forsyth County Alcohol License.

- _____ **I am a United States citizen**
- _____ **I am a legal permanent resident of the United States**
- _____ **I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.**

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e) (1), with this affidavit.

The secure and verifiable document such as a copy of a photo identification, driver's license, passport, permanent resident card, etc., provided with this affidavit can best be classified as:

_____.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in _____ (city), _____ (state).

Signature of Applicant

Printed Name of Applicant

Applying on Behalf of / Name of Associated Business

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ____ DAY OF _____, 20 ____

Notary Public

My Commission Expires _____