



MUNICIPALITY OF ANCHORAGE
 OFFICE OF THE MUNICIPAL CLERK
 P.O. Box 196650 (632 W. 6th Ave., Ste 250)
 Anchorage, Alaska 99519-6650

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License No.	_____
Date Issued	_____

**PAWNBROKER
 APPLICATION**
 (LICENSES ARE NOT TRANSFERABLE)

PLEASE PRINT OR TYPE INFORMATION

Application Date: _____

I, _____, hereby make application for a New or Renewed **PAWNBROKER LICENSE** in accordance with Title 10 of the Anchorage Municipal Code for the 20_____, 20_____ license years. **I understand a bond in the amount of \$25,000 is required (must provide original bond).**

APPLICANT'S NAME: _____ (PHONE) _____

APPLICANT'S MAILING ADDRESS: _____ (ZIP) _____

APPLICANT'S STREET ADDRESS: _____ (ZIP) _____

BUSINESS NAME: _____ (PHONE) _____

BUSINESS MAILING ADDRESS: _____ (ZIP) _____

BUSINESS STREET ADDRESS: _____ (ZIP) _____

1. Have you, within 5 years previous to this date, been convicted of a crime involving larceny, theft, receiving or concealing stolen property, dealing with illegally obtained property or involving misrepresentation or fraud? _____
 (If your answer is "yes," please itemize charges, places, dates, sentences imposed:)

2. Describe the terms and conditions of the lending agreement you use or intend to use:

3. What period of time is allowed for redemption of articles? _____

4. What rate or amount of interest is charged for use of money loaned? _____

5. What other charges are made for use of money loaned? _____

6. How are articles identified for redemption? _____

\$25,000 BOND ATTACHED

Note: State of Alaska business license is required.

State of Alaska Business License No. _____ Date Issued _____ Expiration date _____

IF BUSINESS ENTITY, PLEASE COMPLETE:

Corporate Officer's Name	Address	Zip Code	Telephone
Registered Agent:			

State of Alaska)
) ss:
 Third Judicial District)

_____, being duly sworn, deposes and says that he/she is the individual making the foregoing application and authorized agent for this business that the answers to the questions and other statements contained in this application are true and complete to his/her knowledge.

Subscribed and Sworn to before me this _____ day of _____, 20_____.

 Signature of Applicant

Notary Public
 My commission expires: _____

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I.D. Furnished and Number	Fee Paid: \$	Cash	Receipt No.