

**APPLICATION FOR LICENSE AS SECOND HAND SEMI-PRECIOUS  
METAL DEALER AND/OR PAWNBROKER  
CHAPTER 7 TOWN OF WYTHEVILLE  
54.1-4100 THROUGH 54.1-4111 CODE OF VIRGINIA**

BUSINESS NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

BUSINESS LOCATION \_\_\_\_\_

TYPE OF BUSINESS (JEWELER, PAWN SHOP, METAL BROKER, ETC) \_\_\_\_\_

Give information below for each owner. List prior address as well as present address where any address is less than 3 years old.

NAME	ADDRESS	DOB	SSN
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List two (2) references (not related or business associates) for each owner

REFERENCES	ADDRESS	PHONE NUMBER
_____	_____	_____
_____	_____	_____

If additional space is needed, note on reverse side.

IS THIS BUSINESS CURRENTLY LICENSED TO DO BUSINESS IN THE TOWN OF WYTHEVILLE?  
 YES  NO IF YES, UNDER WHAT NAME? \_\_\_\_\_

IS THIS BUSINESS OR ANY OWNER LICENSED AS A JUNK DEALER OR PAWNBROKER BY THE STATE OF VA?  YES  NO IF YES, GIVE NAME AND COUNTY IN WHICH LICENSE WAS ISSUED  
\_\_\_\_\_

HAS ANY OWNER EVER BEEN CONVICTED OF A CRIME?  YES  NO IF YES, GIVE NAME, OFFENSE, LOCATION AND DATE OF CONVICTION AND SENTENCE \_\_\_\_\_

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I (WE) HEREBY MAKE APPLICATION TO THE TOWN OF WYTHEVILLE FOR A LICENSE TO DO BUSINESS UNDER CHAPTER 7 OF THE TOWN OF WYTHEVILLE AND 54.1-4000 THROUGH 54.1-4014 CODE OF VIRGINIA. I (WE) CERTIFY THAT THE ENTRIES MADE IN THE APPLICATION ARE TRUE AND CORRECT.

NOTICE: FALSIFICATION OF APPLICATION MAY BE GROUNDS FOR DENIAL OF LICENSE.

**ALL OWNERS MUST SIGN:**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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OFFICE USE ONLY

INVESTIGATION CONDUCTED  YES  NO BY: \_\_\_\_\_ DATE COMPLETED \_\_\_\_\_

RECOMMEND APPROVAL  YES  NO CHIEF \_\_\_\_\_ DATE \_\_\_\_\_

DATE LICENSE ISSUED \_\_\_\_\_ TREASURER \_\_\_\_\_ DATE \_\_\_\_\_