

TMC 747
CODE 6636

**City of Toledo License Bureau
One Government Center Suite 2000
Toledo, Ohio 43604**

Lic. No. _____
Date Iss. _____
For Year _____

**APPLICATION
SECOND HAND DEALER**

Fee: \$125.00
Paid: _____
Bal. Due _____

_____ Name of Application	_____ Name of Business
_____ Home Address	_____ Business Address
_____ Home Phone	_____ Business Phone
_____ Social Security Number	_____ State whether Individual, Partnership or Corporation

List Names, Addresses and Date of Birth for all Partners and/or Officers:

_____ Name	_____ Name	_____ Name
_____ Address	_____ Address	_____ Address
_____ Date of Birth	_____ Date of Birth	_____ Date of Birth

Has Applicant ever been licensed as a Second Hand Dealer _____

Has such license ever been revoked? _____

Has Applicant ever been denied a license as a Second Hand Dealer? _____

I/we have not been convicted, within five (5) years of the date of application, of buying, receiving, retaining, concealing, or disposing of goods and/or property which was stolen or otherwise unlawfully obtained, or of any theft offense as defined by Ohio Revised Code Section 2913.01 (K) or of any felony drug abuse offense as defined by Ohio Revised Section 2925.01.

Date

Signature of Applicant

**For Police Use Only
(Return to License Bureau within 5 business days)**

Checked by Toledo Ohio Police Dept. Records & Identification Section

_____ No Record Found

_____ See Attached Record

Date _____

Clerk _____

Date

Commissioner of Treasury

08/01