Town of Hooksett, NH

PAWN BROKER LICENSE

It is unlawful for any person, firm, or corporation to conduct the business of pawnbroker within the Town limits unless such person, firm or corporation shall have first obtained a pawnbroker’s license from the Town of Hooksett in accordance with Town Ordinance 2014-1. All applicants for a pawnbroker’s license shall file an application for such license with the Town Clerk on forms to be provided by the Clerk.

DOCUMENTS REQUIRED WITH APPLICATION

- Proof of applicant’s right to possession of premises
- Evidence that the corporation is in good standing under the statutes of the State of New Hampshire
- Foreign corporations shall provide evidence that the corporation is authorized to do business in the State of New Hampshire
- Proof of subscription to authorized electronic filing software

FEES REQUIRED FOR INITIAL APPLICATION

$250.00 nonrefundable application fee

TERMS OF LICENSE

The term of a Pawnbroker license is for one year from the date of issuance.

If you have any questions regarding a pawnbroker license, please call the Town Clerk’s office at 603-485-9534.
# Town of Hooksett NH
## Pawnbroker License Application

### GENERAL INFORMATION
1. Name of business: 
2. Trade name of establishment (d/b/a): 
3. Address of Business: 
4. Address of premises: 
5. Business telephone: 
6. Applicant is a: 
   - [ ] Sole Proprietorship  
   - [ ] Partnership  
   - [ ] Corporation  
   - [ ] Limited Liability Company

### SOLE PROPRIETORSHIP INFORMATION
7. If sole proprietorship, list name, address, and date of birth of proprietor:

### PARTNERSHIP INFORMATION
8. If partnership, list name, address, and date of birth of partners:

### LIMITED LIABILITY INFORMATION
9. If limited liability company, list name, address, and date of birth of members and manager:
**CORPORATION INFORMATION**

10. If corporation, list name: 

11. If corporation, list names, addresses, and dates of birth of:
   
   **President** 

   **Vice-President** 

   **Treasurer** 

   **Secretary** 

   **Director** 

   **Director**

12. List all stockholders owning 10% (or more) of the issued stock:

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<tr>
<th>Name</th>
<th>Address</th>
<th>Date of Birth</th>
<th>Position</th>
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13. If stock is pledged, state name and address of person or entity to whom pledged and terms thereof. If additional space is needed, use separate sheet. Attach copies of articles of incorporation and certificate of good standing from the State of NH. (If new corporation, attach certificate and articles of incorporation and organizational minutes.)

14. List any other persons who have a direct or indirect financial interest in this business and the percentage of their interest:

15. Has the corporation, any officer, director, manager, stockholder owning or controlling 10% or more of the corporation, member, entity, or person having an interest in the business been adjudicated bankrupt, entered into a "Wage-Earner Plan" pursuant to Chapter XIII of the Federal Bankruptcy Act, or made a general assignment for the benefit of creditors during the past three years?

( ) Yes  ( ) No  If yes, please explain on separate sheet.
16. Has a judgment based on fraud ever been entered against the applicant, any officer, director, manager, partner, or stockholder owning or controlling 10% or more of the corporation, member, entity, or any person having an interest in the business?

(  ) Yes  (  ) No  If yes explain.

________________________________________________________________________________

________________________________________________________________________________

17. Has the applicant, manager, partner, officer, director, or stockholder ever held a pawnbroker's license?

Yes  (  ) (  ) No  If yes, complete the following.

Name of licensee: ________________________________

Relationship to this applicant: ________________________________

Dates licensee was held: ________________________________

City and state where license was held: ________________________________

18. Has the applicant, manager, partner, officer, director, or stockholder ever been denied a pawnbroker license?

(  ) Yes  (  ) No

19. Name of person denied a license: ________________________________

20. Relationship to this applicant: ________________________________

21. Date of denial: ________________________________

22. City and state where denied: ________________________________

23. Reason for denial: ________________________________

24. Has the applicant, manager, partner, officer, director, or stockholder ever had a pawnbroker license suspended or revoked?

(  ) Yes  (  ) No  If yes, complete the following:

Name of person with suspended or revoked license: ________________________________

Relationship to this applicant: ________________________________

Dates of suspension or revocation: ________________________________

City and state of suspension or revocation: ________________________________

Reason for suspension or revocation: ________________________________
FINANCIAL INFORMATION

25. State purchase price and/or terms of lease:


26. Attach a copy of mortgage agreement, deed, or lease.

27. Cash to be invested:

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<tr>
<th>By Whom</th>
<th>Bank &amp; Account #</th>
<th>Amount-Source</th>
<th>Purpose</th>
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28. Complete the following on all business loans obtained. Attach copies of loan agreements

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29. List account name, bank, bank address, account number, and the names of all authorized signatories on all business accounts:


30. Is there a written management agreement: ( ) Yes ( ) No

31. Is there a written partnership agreement? ( ) Yes ( ) No

32. Attach copies of all written agreements. If there are no written agreements or contracts, a statement must be provided detailing the oral agreements.

PROPERTY INFORMATION

33. Is the building owned or leased?

34. Name and address of the owner of the building in which the premises is located:


35. Is the land owned or leased?

36. Name and address of the owner of the land upon which the building is located:


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<tr>
<td>37.</td>
<td>Attach a copy of deed, lease, or other document showing applicants right to possession of premises.</td>
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<td>38.</td>
<td>Name of applicants insurance company, agent, policy number, and effective date of policy:</td>
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