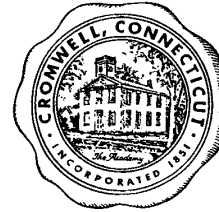




CROMWELL POLICE DEPARTMENT

5 WEST STREET
CROMWELL, CT 06416



ANTHONY J. SALVATORE, SR.
CHIEF OF POLICE

PHONE: (860) 635-2256
FAX: (860) 635-8248

APPLICATION FOR LICENSE FOR PRECIOUS METALS, STONES, INC.
In accordance with Connecticut General Statutes 21-100.

PRINT LEGIBLY - ALL BOXES MUST BE FILLED IN, IF NONE WRITE "NONE."

DATE OF APPLICATION _____ DATE FINGERPRINTED _____

NAME OF BUSINESS _____

NAME _____
LAST FIRST INITIAL

ADDRESS _____
STREET OR P.O. BOX CITY OR TOWN STATE/ZIP

TELEPHONE NO. (HOME) _____ (BUSINESS) _____

AGE _____ DATE OF BIRTH _____ SEX _____

LIST LOCATIONS OF STORAGE WARE HOUSES OR SATELLITE STORES _____

DATES YOU WOULD LIKE TO CONDUCT BUSINESS _____

PLACE YOU WILL BE CONDUCTING BUSINESS _____

ARREST RECORD (OTHER THAN MOTOR VEHICLE OFFENSES)

CHARGE	DISPOSITION	DATE	PLACE

LIST ALL EMPLOYEES: (MUST BE UPDATED AS EMPLOYEES LEAVE AND ARE HIRED)

NAME	ADDRESS	DATE OF BIRTH	CRIMINAL RECORD

APPLICATION FOR LICENSE FOR PRECIOUS METALS, STONES, INC.
In accordance with Connecticut General Statutes 21-100.

Page two

NAME ALL PRINCIPALS IN THE BUSINESS AND THEIR TITLES:

NAME	ADDRESS	DATE OF BIRTH	TITLE

My signature below attests to the accuracy, completeness and to the truth of all information supplied in this application. I understand that any statements in this application that are determined to be false or inaccurate shall constitute grounds for the permit not to be issued. I further understand that if I knowingly make a statement that is untrue and which is intended to mislead a law enforcement officer in the performance of his official function, I will be in violation of Section 53a-157 of the Connecticut General Statutes; False Statement.

DATE _____ **SIGNATURE** _____

Subscribed and Sworn to, before me

This _____ **day of** _____, _____, **in accordance with the Connecticut General Statutes.**

NOTARY PUBLIC