



**SNYDER COUNTY SHERIFF'S OFFICE**  
**Application for a License to Deal in Precious Metals**  
**(Business Combinations)**

APPLICATION #
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**BUSINESS INFORMATION**

BUSINESS NAME			
IF ASSUMED OR FICTICIOUS NAME, LIST THE DATE OF REGISTRATION OF SAME:			
STREET ADDRESS		MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)	
CITY	STATE	ZIP	PHONE #
NAME OF OFFICE MANAGER (IF ANY)			
HOME STREET ADDRESS		HOME MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)	
CITY	STATE	ZIP	PHONE #
IF A PENNSYLVANIA CORPORATION, LIST THE DATE OF INCORPORATION:			
IF A FOREIGN CORPORATION, LIST THE DATE OF REGISTRATION IN PENNSYLVANIA:			
LIST THE NAME OF THE STATE AND DATE IN WHICH THE CORPORATION WAS INCORPORATED:			

**PARTNERS, OFFICERS AND BOARD MEMBERS**

**IF MORE THAN ONE, LIST THE REMAINING PARTNERS, OFFICERS AND BOARD MEMBERS ON THE BACK OF THIS APPLICATION**

NAME (LAST, FIRST, MIDDLE, SUFFIX)	AGE	DATE OF BIRTH	SEX
PREVIOUS NAMES OR ALIASES			POSITION WITH BUSINESS
HOME STREET ADDRESS		HOME MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)	
CITY	STATE	ZIP	PHONE #

**LIST PREVIOUS RESIDENCES FOR THE PAST FIVE YEARS**

IF MORE ROOM IS NEEDED, LIST THE REMAINING RESIDENCES ON A SEPARATE SHEET OF 8½x11" WHITE PAPER AND ATTACH TO THIS APPLICATION

1.	DATES RESIDED
2.	DATES RESIDED
3.	DATES RESIDED

HAS THIS PERSON EVER BEEN INDICTED OR CONVICTED OF A CRIME IN THIS COMMONWEALTH OR ELSEWHERE?	<input type="checkbox"/> YES <input type="checkbox"/> NO
HAS THIS PERSON EVER HAD AN APPLICATION FOR A PRECIOUS METALS DEALER LICENSE REJECTED OR HAD A PRECIOUS METALS DEALER LICENSE SUSPENDED, CANCELLED OR REVOKED BY A FEDERAL, STATE OR MUNICIPAL AUTHORITY?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**\*\*\*NOTICE\*\*\***

**Pursuant to §4904(b) of the Pennsylvania Crimes Code (relating to *Unsworn falsification to authorities*), a person commits a misdemeanor of the third degree if he or she makes a written false statement which he does not believe to be true.**

SIGNATURE OF BUSINESS REPRESENTATIVE	NAME	TITLE	DATE
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Attach to this application, copies of:

- Federal Employer Identification Number (EIN)
- Pennsylvania State Sales Tax License
- Certificate of Organization (or similar document identifying registration of business)
- Check or money order for \$50.00 made payable to "County of Snyder"

**PARTNERS, OFFICERS AND BOARD MEMBERS CONTINUATION**

**IF MORE ROOM IS NEEDED, LIST THE REMAINING PARTNERS, OFFICERS AND BOARD MEMBERS ON A SEPARATE SHEET OF 8½x11" WHITE PAPER AND ATTACH TO THIS APPLICATION**

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