



Greeley Police Records
2875 West 10th Street
Greeley, CO 80634
(970)350-9677
FAX (970)350-9686

Application for Pawnbroker Manager License

New License

Renewal

Official Use Only

Forwarded to DC by _____ on _____

Approved by _____ on _____

Denied by _____ on _____

Reason for Denial: _____

Applicant Information

1. Name of Applicant: _____

2. Date of Birth: _____

3. Race: _____ Sex: _____ Height: _____ Weight: _____

4. Social Security Number: _____

5. Driver's License Number: _____ Place of Birth: _____

6. Address of Applicant: _____

City: _____ State: _____ Zip Code: _____

7. Home Telephone Number: _____

8. Personal Email Address: _____

PLEASE CONTINUE TO THE NEXT PAGE OF THIS APPLICATION

Pawnbroker Manager Checklist

Initial Pawnbroker Manager Application

Renewal Pawnbroker Manager Application

Completed Application with Notarization
Fingerprint Documentation
Payment of \$55.00

Completed Application with Notarization
Fingerprint Documentation
Payment of \$55.00

Applicant Signature: _____ Date: _____



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AUTHORITY FOR RELEASE OF INFORMATION

Name (Last) (First) (Middle)

Date of Birth Month/Day/Year
Sex

I, do hereby authorize a review and full disclosure of all records specified below, or any part thereof, concerning myself, by and to ANY duly authorized agent of the City of Greeley, Greeley Police Department, or Private investigator working as an agent of the City of Greeley for purposes of the application, whether the said records are of Criminal Justice, public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of financial or credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records; records of complaint of a civil nature made by or against me, whosesoever located.

I understand that all information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for licensing by the City of Greeley, Finance Department. I understand that all materials pertaining to this background investigation become the property of the City of Greeley, Finance Department and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is not approved, the sources of confidential information will not be revealed to me.

A photocopy of this signed release form will be considered valid as an original hereof.
MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Affiant's Signature

Subscribed and sworn to before me this day of

Notary Public Expiration Date (Notary Seal)



AFFIDAVIT OF LAWFUL PRESENCE

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

___ I am a United States citizen, or

___ * I am a Permanent Resident of the United States, or

___ * I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute § 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date

*If Affiant affirms that he/she is either a Permanent Resident or otherwise lawfully present in the United States, please have Affiant complete the S.A.V.E. verification form and forward both forms to H.R. for verification of lawful presence in the S.A.V.E. program.

- For internal use only:**
IDENTIFICATION PROVIDED
- ___ Current Colorado Driver’s License or Permit
 - ___ United States passport
 - ___ Current Colorado Identification Card Issued by Department of Motor Vehicles
 - ___ United States Military ID/Common Access Card
 - ___ United States Military Dependent Identification Card
 - ___ United States Coast Guard Merchant Mariner Card
 - ___ Native American Tribal Document
 - ___ Out of State DL/ID from any state except Alaska, Illinois, New Mexico, Utah, or Washington.
 - ___ Out of State DL/ID that says “Enhanced”
 - ___ Foreign passport with photo, US Visa, I-94
 - ___ Certificate of Naturalization w/photo less than 20 years old
 - ___ Certificate of Citizenship w/photo less than 20 years old

- For internal use only:**
ALTERNATE I.D. REQUIREMENTS
- If applicant can not produce one of the identification documents listed at left, please refer to Attachments A and B of the Department of Revenue’s “Rules for Evidence of Lawful Presence” located at U:\City Attorney\Immigration
- Questions? contact the City Attorney’s office.

S.A.V.E. VERIFICATION FORM

Pursuant to Section 24-76.5-103 of the Colorado Revised Statutes, the City of Greeley must verify that individuals who apply for public services from the City are lawfully present in the United States. If an Applicant executes the Affidavit stating that he or she is an Alien lawfully present in the United States, the City of Greeley must verify such lawful presence through the federal Systematic Alien Verification of Entitlement program ("SAVE program"). This verification program is operated by the United States Department of Homeland Security.

The following information is required in order for the City to perform the SAVE program verification. In addition, please affix to this form a legible copy of your identification or other documentation which demonstrates lawful presence in the United States.

Name _____

Telephone Number _____

Social Security Number _____

Date of Birth _____

- City Benefit requested:**
- Food Tax Rebate
 - Water and Sewer Department Rebate
 - Commercial/Professional License
 - Liquor License
 - Loan (including Historic Preservation loans)
 - Grant
 - Emergency Assistance

For internal use only:
Requesting Department _____
Staff contact _____
Forward the Affidavit, SAVE Verification form, and copy of appropriate identification documents to H.R.

H.R. use only:
___ S.A.V.E. verification performed
 ___ Affiant is lawfully present in the United States
 ___ Affiant is not lawfully present in the United States

___ Documents returned to originating Department.