

LICENSE APPLICATION

for PAWNBROKER SECONDHAND ARTICLE DEALER SECONDHAND JEWELRY DEALER SECONDHAND ARTICLE DEALER MALL/FLEA MARKET

Pawnbroker \$210.00 Secondhand Article \$90.00 /\$75.00 Acct. 11030.4316 Secondhand Jewelry \$90.00 /\$75.00 Acct. 11030.4316 Secondhand Mall/Flea \$165.00 Acct. 11030.4316 Investigation fee \$ 7.00 Acct. 100.2359 Total fee paid \$_ Receipt # **Original Application** Renewal

FEES ARE NON-REFUNDABLE

Instructions: Individual license – Complete Sections 1, 2, 3 and 6
Partnership license – Complete Sections 1, 2, 3, 4, and 6
Corporate license – Complete Sections 1, 2, 3, 5, and 6

Return application and required fees to:
OFFICE OF THE CITY CLERK, 100 N. APPLETON STREET
APPLETON, WI 54911

Date Recv'd

SECTION 1 – APPLICANT INFOR	RMATION					17.00
Applicant Name (Last, First, MI)		Sex	Race	Date of Birth	Place	e of Birth (City & State)
Guarisco "	Sonia G	F	+/		Jagar	TUCOS. Venerundo
Street Address	City		State	Zip	Hom	e Telephone Number
2142 N. Clardvico	by Apple-	10N	WI	5491	4	y
SECTION 2 – CONVICTION REC	ORD			al " "		
Have you, or any other person listed o				og:		
		YES D NO)			
Within the last ten						
	emeanor?		YES V			
	itory violation punishable b					
A coun	ty or municipal ordinance v	riolation?	YES V	NO.		
SECTION 2 PHICHESE INCOME	447.04					
SECTION 3 – BUSINESS INFORM	VIATION					
Business Name	Street Address		City	State	Zip	Telephone Number
D'I Angel B.S.T.	1619 W Co	Negch	WE AD	olean w	. 1 1 1 1 1 1	
Owner's Name	Street Address	, ,	City	(State	: Zip	Telephone Number
Jonia Evarsio	2142 N. Clard	VIew	Dr Agg	yelon w	10101	(920)292-3464
Business Manager's name	Street Address		City '	State	e Zip	Telephone Number
Building Owner's Name	Street Address		City	State	Zip	Telephone Number
7 V						

Broker Elizabeth Pinggold Newmark Grubb 200 E. OVERI Washington St Swite 2A Appleton, W1 54911

920-560-5061

SECTION 4 – PART	INERSHIP	INFORM	ATION	Sec. Link	EMAN				- - - -	M _s =
Partnership Name	e:				-1.2					
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lame (Last, First, MI)	Sex	Sex Race DOB Street Address City					City State		Zip	
Mary Mary Comment										
ECTION 5 – CORE	ODATE IN	EODMA	TION	1 194	- 11 millions					
		IFORIVIA	TION							
Corporation Name:								State of	Inco	p.
st name, address, se	x, race and d	ate of birt	h of all p	artners. At	tach additional she	ets, if necessa	iry			
lame (Last, First, MI)	50 = E3-E	Sex	Race	DOB	Street Address	Various	City	S	tate	Zip
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ECTION 6 - PENA	LTY NOTE	CF								
						W BIL		11-1 2071 11		X=LIMIT
understand that this I					misrepresentation	or false staten	nents contained	in the applicati	ion or f	or any
olation of Wis. Stats.		,								
nder penalty of law, I erk within ten (10) da							the best of my I	knowledge. I a	gree to	inform the
ignature of Applicant:	Son	is fa	brielle	2 Grean	isock			Date C	910	7117
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OM DEVELOPMENT ITY SEALER afety and Licensing	Com	mon Coun	cil	Date Is	ssued	Expiration	Date	License Nu	mber	

Reasonable accommodations for persons with disabilities will be made upon request and if feasible.