Th	nis application is for	businesses owned b	y an INDIVII	DUAL on	ly, in the S	State of Rh	ode Island
	New Application	Renewal Application	ation FEDER	AL ID/EI	N NUMBE	CR	
	All lines MUST be co	_					_
1.	LAST NAME	FIRST NAME	MIDDLE INITIAL	SO	CIAL SECURITY	DATE OF BIRT	Н
2.	RESIDENTIAL STREET AND NUMBER	CITY / TO	OWN	STATE	ZIP	HOME T	TELEPHONE NUMBER
3.	BUSINESS NAME				В	USINESS TELEPHONE	E NUMBER
4.							
	STREET ADDRESS		CITY		ST	FATE	ZIP
5.	NORMAL BUSINESS HOURS	DAYS OF	FOPERATION			DATE BEGINNI	NG BUSINESS
6.	BRANCH NAME	STREET	CITY		STATE	ZIP	TELEPHONE
7.	Do you buy goods other	r than at your office? Is	f YES explain on	line #15.		YES _	NO
8.	Have you ever been refu	sed, suspended or revolute to act as an agent of su					a precious
	If YES, explain or		ien ousmess in in	is state of fa	.wrar jarisare		NO
9.]	Have you ever been arres If YES explain on		or any other juriso	diction?		YES _	NO
10	. Have you ever been con If YES explain on		narge or violation	in either thi	is state or an		diction? NO
11.		convicted of any offense			her jurisdicti	on?	
10	If YES explain on		. ,	• • •		ES NO _	
12.	. Have you ever pled gui jurisdiction?	•	to any crime, char	ge or violat	ion in either		•
13	If YES explain on . Have you ever been pla		ny crime charge o	or violation	in either this		NO
10	jurisdiction?	coa on probation for an	i, cimic, charge c	, violation	in citici tilis	YES_	NO

Please complete, sign and notarize the reverse side

	* *	residential addresses, dates of birth and socia ngaged in buying precious metals.	l security numbers of NONE			
15						
I, the undersign	ed, have read and understand	the provisions of title 6, chapter 11.1, inclusi-	ve, of the Rhode Island			
General Law p	ertaining to the regulation of	the precious metals business and agents. I her	eby apply for a license			
pursuant to the	provisions of title 6, chapter	11.1 of the Rhode Island General Law and ma	ke oath to the truth and			
accuracy of all	statements, answers, and repr	esentations made in this application, including	g all supplementary			
statements here	to attached. I acknowledge th	at any false or incorrect information contained	l within this application			
may subject me	to criminal prosecution unde	er Rhode Island General Law 11-18-1 and/or d	lenial of my application for			
license for the p	ourchase of precious metals.					
Signature of app	plicant:	Date signed:				
Subscribed and	sworn to at	, before me this day of	, 20			
	Notary Public	My commission expires,				
Make check(s)	payable to: Department of At	torney General, (one check per \$50.00 fee list	ed below).			
	License fee	\$ 50.00 (This applies to NEW licens \$ 50.00 (This applies to NEW and R \$ 50.00 (Per Branch)				
MAIL TO:	Attorney General Julius C. Precious Metals Licensing 4 Howard Avenue Cranston, RI 02920	. Michaelson Customer Service Center				