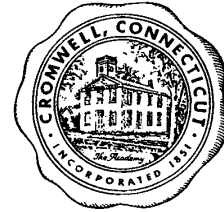




CROMWELL POLICE DEPARTMENT

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/ETC IN ACCORDANCE WITH CONNECTICUT GENERAL STATUTES 21-100. ALL BOXES MUST BE FILLED IN, IF NONE WRITE "NONE."

PRINT LEGIBLY

DATE OF APPLICATION _____ DATE FINGERPRINTED _____

NAME OF BUSINESS _____ ADDRESS _____

NAME _____
LAST FIRST INITIAL

ADDRESS _____
STREET CITY OR TOWN STATE

TELEPHONE NO. (home) _____ (business) _____

AGE ____ DATE OF BIRTH _____ SEX ____

LIST LOCATIONS OF STORAGE WAREHOUSES OR SATELLITE STORES IF ANY

DATES YOU WOULD LIKE TO CONDUCT BUSINESS _____

PLACE YOU WILL BE CONDUCTING BUSINESS _____

ARREST RECORD (other than motor vehicle offenses) (additional information on rear of page)

CHARGE	DISPOSITION	DATE	PLACE

List All Employees: (Must be updated as employees leave and are hired)

NAME	ADDRESS	Date of Birth	Criminal Record

Name All Principals in the Business and their titles:

NAME	ADDRESS	Date of Birth	TITLE

The information submitted by me in this application is the truth. I agree that if I have falsified any item in this application, I will not be entitled to the license sought. I also fully 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 _____

Sworn and subscribed to before me this ____ day of _____, 20__, in accordance with the Connecticut General Statutes.

Notary Public _____