

**Instructions to apply for a license pursuant to
Local Law 2 Chapter 165, Pawnbroker, Secondhand Dealer and Jewelry and Coin Exchange
Dealers**

New Application is \$300.00 and a Renewal Application is \$150.00

- ✓ **Complete the application form.**
 - You may obtain the electronic application form at <http://www.irondequoit.gov>
 - (click on Forms, Clerk forms)
 - The application must be fully completed and submitted electronically by emailing it to Town of Irondequoit Town Clerk, Latasha Elder at clerk@irondequoit.gov.
 - Once the application is received by the Town Clerk's Office, a phone interview will be set up to review your application.
 - All changes and updates to the application should be made after the interview and the final application shall be printed out and **signed in the presence of a notary public**.

- ✓ **Complete a background check.**
 - Register on-line with IdentoGO at www.identoGO.com to schedule a live scan fingerprint New York State criminal record check or by phone at 1-877-472-6915.
On-line IdentoGO registration instructions:
 - ▶ Go to www.identoGO.com
 - ▶ Click on the NYS image
 - ▶ Click on the online scheduling link at top of page
 - ▶ Select language
 - ▶ Enter name
 - ▶ Enter the ORI number – NYDCJSPRY (you will need an unsuppressed record)
 - ▶ Follow prompts to select location, date and time
 - ▶ Complete the personal information sections
 - Report to an IdentoGO office for your fingerprint scan and to complete paperwork. IdentoGO has the following locations:
36 West Main St Suite 545, Rochester, NY 14614
3300 Monroe Ave Suite 206, Pittsford, NY 14618
 - Receive your criminal record check in the mail from IdentoGO. **DO NOT OPEN THE LETTER.**

- ✓ **Submit the application form and background check.**
 - The business owner or the daily business operator shall **hand deliver** the **original** application form, the **unopened** New York State criminal record check received from IdentoGO, valid government issued photo identification and \$300.00 or \$150.00 in the form of cash, money order or bank check to the Irondequoit Town Clerk's Office located at 1280 Titus Ave, Rochester, NY 14617. Make money orders or bank checks payable to the **“Town of Irondequoit”**.
 - Once your application is received and your fee is paid, the Clerk will provide you with a receipt.
 - You will be notified by the Town Clerk's Office once your application has been reviewed.

**OFFICE OF THE TOWN CLERK TOWN OF
IRONDEQUOIT 1280 Titus Avenue
ROCHESTER, NY 14617**

2025 LICENSE APPLICATION

CHECK ONE: **NEW (\$300.00):** **RENEWAL (\$150.00):**

Indicate with an “X”

| | |
|---|----------------------------------|
| <input type="checkbox"/> Pawnbroker | [Local Law 2 Chapter 165] |
| <input type="checkbox"/> Secondhand Dealer | [Local Law 2 Chapter 165] |
| <input type="checkbox"/> Jewelry and Coin Exchange | [Local Law 2 Chapter 165] |

LICENSE FEES ARE NOT PRORATED AND ARE NON-REFUNDABLE AND NON-TRANSFERABLE

WARNING: The Irondequoit Town Clerk may deny a license to any person who makes a material misrepresentation on an application.

| | | | | |
|---|--|---------------------|-------|-----|
| 1 | Business Information: | Tax ID No. _____ | | |
| | Name of Business _____ | | | |
| | Business Phone (include area code) | Email Address _____ | | |
| | Describe the nature of the business activities (ex. items bought and sold) _____ | | | |
| | Business Address | City | State | Zip |
| | Hours of Operation: _____ | | | |
| | List all e-commerce websites and account associated with the business: _____ | | | |
| | _____ | | | |
| | _____ | | | |

| | | | | |
|---|---|-----------------------------|--------------------------|-----|
| 2 | Business Owner: (Valid Government Issued Photo ID Required) | | | |
| | Full Name of Business Owner (Include Maiden Name if applicable) | | | |
| | Date of Birth | Email Address _____ | | |
| | Residence Phone | Cell Phone _____ | | |
| | Residence (No P.O. Box) | City | State | Zip |
| | Are you the sole owner of the business? | | | |
| | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If “NO”, complete Box #4 | |

| | | |
|---|---------------|-------|
| Daily Business Operator: (if other than owner) (Valid Government Issued Photo ID Required) | | |
| Full Name of Daily Business Operator (Include Maiden Name if applicable) | | |
| Date of Birth | Email Address | |
| Residence Phone | Cell Phone | |
| Residence (No P.O. Box) | City | State |
| | | Zip |

| | | | | | | | | | | | | | | | | | |
|---|---|---------------|--------------|---------------|--------------|--|--|--|--|--|--|--|--|--|--|--|--|
| 4 | NOTE: If the owner or operator is a partnership, corporation, D.B.A. or other business entity, set forth the following information for all of the principals of the business (attach additional sheets if necessary): | | | | | | | | | | | | | | | | |
| <p>Name of Business Entity: _____</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Full Name</td> <td style="width: 25%;">Title</td> <td style="width: 25%;">Date of Birth</td> <td style="width: 25%;">Home Address</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> | | Full Name | Title | Date of Birth | Home Address | | | | | | | | | | | | |
| Full Name | Title | Date of Birth | Home Address | | | | | | | | | | | | | | |
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| | | | |
|---|-----------------------------|---------------|-------|
| 6 | Property Owner: | | |
| | Enter text | | |
| | Full Name of Property Owner | Date of Birth | |
| | Residence Phone | Cell Phone | |
| | Residence (No P.O. Box) | City | State |
| | | | Zip |

7

Identity of employees (attach additional sheets if necessary)

Name

Date of Birth

| | |
|--|--|
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8

Has the owner or operator had any previous involvement with any other pawn shop, secondhand dealer store or jewelry and coin exchange?

Yes No

If YES, please provide the following information for each one (attach additional sheets if necessary)

Name of Owner of Operator

Name of Business

Location

Dates Involved

9

In the past two years has the business, business owner or manager had a pawnshop, secondhand dealer or jewelry and coin exchange dealer's license or permit suspended or revoked or denied? If so please provide any written documentation that you received on your suspension, revocation or denial.

Yes No

If YES, please provide the following information for each one (attach additional sheets if necessary)

Name of Owner or Operator:

Name of Business:

Location:

Brief Explanation/Reason:

10

Is any merchandise from your pawnshop, secondhand dealer or jewelry and coin exchange, sold or distributed at a different location, by private persons or business at off site locations, or through online stores? (such as ebay, amazon, overstock, or private vendors).

Yes No

If Yes, please provide the following information for each one (attach additional sheets if necessary)

Name of Agent or business: _____

Address for above: _____

Email: _____

Online site name and user

Information for above: _____

Name of Agent or business:

Online site name and user

Information:

Name of Agent or business:

Online site name and user

Information:

ACKNOWLEDGMENTS

11

I understand and acknowledge that completion and submission of the application does not constitute a valid license/permit and that operation of my business is not permitted until my application has been approved and the license issued by the Town of Irondequoit's Town Clerk .

_____ (Initial)

12

I understand and acknowledge that the license holder and/or their employees shall operate the business so that it is not a source of disruption or disorder in and around the area where the business is located and shall cooperate with any and all investigations relative to the business.

_____ (Initial)

13

I understand and acknowledge that the applicant and/or operator shall maintain all licenses required for the operation of the business and shall notify the License Unit of the Town of Irondequoit's Town Clerk Office in writing of any change in status of said licenses.

_____ (Initial)

14

I understand and acknowledge that licenses are not transferrable and that prior to changing the name, type, location or ownership and/or management of the business, the applicant and/or operator shall notify the License Unit of the Town of Irondequoit's Town Clerk Office.

_____ (Initial)

15

I understand and acknowledge that licenses issued by the Town of Irondequoit are annual licenses. Pawnbroker, Secondhand Dealer and Jewelry and Coin Exchange licenses expire automatically on December 31 of each year. I understand I must apply for a renewal license prior to January 1st the following year.

_____ (Initial)

16

I understand and acknowledge that as the owner/operator of a licensed business, I shall not operate the business or permit any occupancy beyond the hours set forth by law and set forth on said license.

_____ (Initial)

17

I understand and acknowledge that I am responsible for knowing and obeying, and ensuring that my employees know and obey, applicable laws and rules as contained in the Local Laws of the Town of Irondequoit, including Local Law 2 Chapter 165, as well as any applicable village, town, state and Federal Laws.

_____ (Initial)

NOTICE

Pursuant to Penal Code §210.45 it is a crime punishable as a Class A Misdemeanor under the laws of the State of New York for a person, in and by written instrument, to knowingly make a false statement or to make a statement which such person does not believe to be true.

I acknowledge that all the information contained in this application is correct, to the best of my knowledge, and I understand that making false statements on this application may result in the denial or revocation of the license issued by the Town of Irondequoit.

SUBSCRIBED AND SWORN TO BEFORE ME

THIS _____ DAY OF _____ 20 _____

| | |
|-------------------------|------------------------|
| PRINT NAME OF APPLICANT | SIGNATURE OF APPLICANT |
|-------------------------|------------------------|

| | |
|--------------------------------------|--------------------|
| Notary Public /Commissioner of Deeds | Date of Expiration |
|--------------------------------------|--------------------|

YOUR SIGNATURE MUST BE NOTARIZED OR THE APPLICATION WILL BE RETURNED TO YOU

OFFICE USE ONLY

TOWN OF IRONDEQUOIT'S TOWN CLERK OFFICE

Criminal Check: Application Fee: Zoning: Fire:

Applicant Contact: In Person: Telephone:

Inspection of Premises:

Approved: Denied:

Conditionally Approved:

License No. _____

Signature of Town Clerk

Date

01/2025

Town Clerk Latasha Elder
Licensing Unit

Signature of Chief of Police

Date

Chief Scott Peters
Irondequoit Police Department