



**Western Australia Police**

**Pawnbrokers and Second-hand Dealers  
Licence Application (Corporation)**

Pawnbrokers and Second-hand Dealers Act 1994 (Section 13)

**Please use BLOCK LETTERS when completing this form.**

I hereby make application for a (Tick appropriate box/es)

PAWNBROKER'S LICENCE AND/OR  SECOND-HAND DEALER'S LICENCE

.....  
(Surname)

.....  
(Given names, in full)

DATE OF BIRTH ...../...../..... PLACE OF BIRTH.....  
(Applicant must be 18 years or over)

NAME OF CORPORATION .....

RESIDENTIAL ADDRESS .....

DATE OF INCORPORATION ...../...../..... TEL:.....

TRADING AS .....

BUSINESS ADDRESS .....

..... TEL: ..... FAX: .....

STORAGE ADDRESS ..... TEL: .....

**DOCUMENTATION** (Section 14)

To prove my identity I have supplied the following original documentation, with photocopies, to support my application.

- 1. Birth Certificate
- 2. Passport No.: ..... Expiry date: ...../...../..... (If expired, not more than 24 months old)
- 3. Motor driver's licence: No.: ..... Expiry date: ...../...../.....
- 4. Written Local Government Authority approval stating that they have no objections for the business premises to be used for Pawnbrokers and Second-hand Dealers.
- 5. Newspaper advertisement of our intention to apply for this licence (Section 11):  
..... on ...../...../.....  
(Name of newspaper) (Date of advertisement)
- 6. Certificate of Incorporation and extract
- 7. Business Name and extract
- 8. Letter of Authority from company directors authorising this application
- 9. Storage addresses and telephone numbers
- 10. Have you ever been known by any other name/s?  Yes  No  
If Yes, supply name/s:.....
- 11. Other documents: .....

**CRIMINAL HISTORY**

I have never been convicted of any offences anywhere

OR

Explain below **ALL** offences you have ever been convicted of (excluding Children’s Court convictions). This section **MUST** be completed in full.

**PENALTY FOR FALSE OR MISLEADING INFORMATION IS \$5000.00** (For individuals)

Nature of offence	Court convicted in	Date	Penalty
.....	.....	...../...../.....	.....
.....	.....	...../...../.....	.....
.....	.....	...../...../.....	.....
.....	.....	...../...../.....	.....
.....	.....	...../...../.....	.....

**GOODS INFORMATION**

By which method will you supply Goods Information to the Commissioner of Police:

Modem option                       Fax option

**DECLARATION**

I certify that the above information is true and correct and attached documents are what they are stated to be.

APPLICANT SIGNATURE: .....

WITNESS SIGNATURE: .....                      DATE: ...../...../.....

FULL NAME OF WITNESS:.....

DESIGNATION: .....

TEL. (Private) .....                      TEL. (Business) .....

**NOTE:** This form **must** be signed in the presence of one of the following: Justice of the Peace, Commissioner of Declarations, Police Officer, Teacher, Post Master, Bank/Building Society Manager, Town/Shire clerk, General Practitioner, Chemist, Public Service Officer.

**OFFICE USE ONLY**

Amount paid:.....

Receipt No.:.....

Receipt date:...../...../.....

File No.:...../.....

Licence approved:

Objection to be lodged:

Licensing Officer’s comments:

.....

.....

.....

.....

.....

.....

.....  
LICENSING OFFICER’S SIGNATURE

DATE:        /        /