



ACT
Government

Chief Minister, Treasury and
Economic Development

APPLICATION FOR A PAWNBROKER'S LICENCE

Pawnbrokers Act 1902

PURPOSE

This form is to be used to apply for a pawnbroker's licence under the *Pawnbrokers Act 1902* (the Act). You can access the legislation at www.legislation.act.gov.au. You may also obtain further information and forms at www.ors.act.gov.au.

PRIVACY

The *Information Privacy Act 2014* applies in the ACT. The Act authorises the Commissioner for Fair Trading to collect the information required by this form for the purpose of issuing a licence. The JACS Privacy Policy contains information on how you can access or seek to correct any of your personal information that is held by the Directorate, as well as the process for lodging a complaint about an alleged breach of the *Information Privacy Act 2014*. The Privacy Policy can be found on the JACS website at <http://www.justice.act.gov.au/privacy>. The Commissioner may provide additional information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances.

CONTACT

Access Canberra Shopfront
255 Canberra Avenue, Fyshwick ACT 2609

Opening Hours 9:00am to 4:30pm Monday to Friday

General Enquiries (02) 6207 3000

Access Canberra Postal Address
GPO Box 158, Canberra City ACT 2601

Website www.ors.act.gov.au Email ors.bil@act.gov.au

Fax Number (02) 6207 0424

INSTRUCTIONS FOR COMPLETION & IMPORTANT INFORMATION

- Complete this form using a black or blue pen only.
- Only suitable persons that would not contravene a Territory or Commonwealth law if the person carried on business as a second-hand dealer may be issued a licence. A suitable person is an adult that is not a disqualified person, being either an individual, a partner in a partnership or a director of a corporation.
- A person is disqualified if the person, or if a the person is a corporation the corporation, has committed an offence against the Act or a corresponding law of a State or foreign country or an offence involving fraud or dishonesty in Australia or a foreign country or has been refused a licence, or had a licence cancelled or revoked, under the Act or a corresponding law of a State.
- If the applicant is a company, a separate applicant details page of this form must be completed by each company director.
- If the applicant is a partnership, a separate applicant details page of this form must be completed by each partner.
- You must attach a Police Certificate, available at [www.afp.gov.au/ data/assets/pdf file/3683/NE_CR100.pdf](http://www.afp.gov.au/data/assets/pdf_file/3683/NE_CR100.pdf) for each individual applicant, company director and partner dated no earlier than 2 months prior to the date of this application. Where the applicant is a company you will also need to provide a Police Certificate relating to that company.
- If the applicant is a company you must attach a company extract issued by the Australian Securities and Investments Commission (ASIC) dated no older than 30 days prior to the date of this application. Alternatively the Office of Regulatory Services can perform this for a fee.

TRANSLATING AND INTERPRETING SERVICE

If you require further information or require advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.



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APPLICANT DETAILS *(Each individual proprietor, company director or partner must complete a separate applicant details form)*

TITLE <i>(Mr, Ms)</i>	GIVEN NAMES	SURNAME																				
HOME ADDRESS <i>(Property Name, Unit, Flat No, Street Number, Street Name)</i>																						
CITY / SUBURB / TOWN	STATE / TERRITORY	POSTCODE																				
POSTAL ADDRESS <i>(If different to home address)</i>																						
CITY/ SUBURB/ TOWN	STATE / TERRITORY	POSTCODE																				
HOME TELEPHONE NUMBER	MOBILE TELEPHONE NUMBER																					
()																						
WORK TELEPHONE NUMBER	EMAIL ADDRESS																					
()																						
COMPANY NAME <i>(If applicable)</i>	AUSTRALIAN COMPANY NUMBER (A.C.N.) <i>(If applicable)</i>																					
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PARTNERSHIP NAME <i>(If applicable)</i>	AUSTRALIAN BUSINESS NUMBER (A.B.N.) <i>(If applicable)</i>																					
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APPLICANT STATEMENT

I, or in the case of a corporation the corporation or an executive of the corporation, am not disqualified as described in the instructions for completion on this form.

Yes No

I, _____, confirm that the information supplied in this application is true and accurate and understand that the provision of false or misleading information is an offence.

Signature:

Date: / /

PARTICULARS OF PREMISES *(Complete a separate form for each premises)*

TERM OF LICENCE

<input type="checkbox"/> 1 year	<input type="checkbox"/> 3 years	<input type="checkbox"/> 3 years with annual payment
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NUMBER OF PREMISES

PREMISES ADDRESS *(Property Name, Unit, Flat No, Street Number, Street Name)*

REGISTERED BUSINESS NAME *(If applicable)*

CITY / SUBURB / TOWN	STATE / TERRITORY	POSTCODE
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POSTAL ADDRESS DETAILS *(If different to premises address)*

CITY/ SUBURB/ TOWN	STATE / TERRITORY	POSTCODE
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CONTACT TELEPHONE NUMBER OF PREMISES	CONTACT FAX NUMBER OF PREMISES
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CONTACT MOBILE NUMBER OF PREMISES <i>(If applicable)</i>	CONTACT EMAIL ADDRESS OF PREMISES <i>(If applicable)</i>
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CHECKLIST

CERTIFICATES, APPROVALS & OTHER ATTACHMENTS <i>(Where applicable)</i>	ATTACHED
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A company extract issued by the Australian Securities and Investments Commission (ASIC) dated no older than 30 days prior to the date of this application. Alternatively the Office of Regulatory Services can perform this for a fee.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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A Police Certificate for each individual applicant, partner or company director dated no earlier than 2 months prior to the date of this application.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Two current proof of identity documents, one of which must bear a photograph of you that is still a good likeness, such as a driver's licence or passport for each individual applicant, partner or each influential person where the applicant is a corporation.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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