



ALLEGHENY COUNTY SHERIFF'S OFFICE

WILLIAM P. MULLEN,
SHERIFF

KEVIN M. KRAUS,
CHIEF DEPUTY

PRECIOUS METALS APPLICATION

BUSINESS COMBINATIONS APPLICATION #: _____
(OFFICE USE ONLY)

BUSINESS NAME: _____

If assumed fictitious name; DATE OF REGISTRATION OF SAME: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ EMAIL: _____

If PA Corporation; DATE OF INC.: _____ If Foreign Corporation; DATE OF INCORPORATION: _____

STATE IN WHICH INCORPORATED: _____ DATE: _____

NAME & ALIASES OF PARTNERS, OFFICERS OR BOARD MEMBERS

1. Name: _____ Title: _____ Age: _____ Sex: _____

Address: _____ Phone: _____

2. Name: _____ Title: _____ Age: _____ Sex: _____

Address: _____ Phone: _____

3. Name: _____ Title: _____ Age: _____ Sex: _____

Address: _____ Phone: _____

4. Name: _____ Title: _____ Age: _____ Sex: _____

Address: _____ Phone: _____

5. Name: _____ Title: _____ Age: _____ Sex: _____

Address: _____ Phone: _____

6. Name: _____ Title: _____ Age: _____ Sex: _____

Address: _____ Phone: _____

Have any of the above named partners, corporate officers or members of this corporation's board of directors been indicted or convicted of a crime in this Commonwealth or elsewhere? YES _____ NO _____

If YES, please explain: _____

Have any of the above named partners, corporate officers or members of this corporation's board of directors ever had an application for a precious metals dealer license suspended, cancelled or revoked by any Federal, State or Municipal Authority? YES _____ NO _____

If YES, please explain: _____

NAME OF OFFICE MANAGER: _____

ADDRESS: _____ PHONE: _____

SIGNATURES OF PARTNERS OR OFFICER

Date of Application: _____

1) _____ 2) _____ 3) _____ 4) _____