

License No. _____

Date license issued: _____ Expires: 12/31/ _____

Fee: \$100.00 per year (nonrefundable)



City of Rahway
1 City Hall Plaza
Rahway, NJ 07065
www.cityofrahway.com

Precious Metals Dealer's License Application

This application must be answered completely and truthfully. Incomplete applications will not be processed. The Chief of Police or his designee may request additional information as needed. A non-refundable annual license fee of \$100.00 is due at the time of licensing. All licenses expire on December 31 of each calendar year. Please make check or money order payable to "City of Rahway."

Name of dealer: _____ Company Name: _____

Dealer address: _____

Location of business (if different from above): _____

Phone number of business: _____ Hours of operation: _____

If corporation, please list the name, current home address and telephone number(s) of all officers and stockholders holding more than 10% stock in the corporation below:

NAME	HOME ADDRESS	TELEPHONE

Please list the name, all past home addresses for the past 5 years of all officers and stockholders listed above:

NAME	HOME ADDRESS	DATES OF RESIDENCY

(over)

