

DESCHUTES COUNTY APPLICATION FOR ANTIQUE, SECONDHAND & JUNK DEALERS LICENSE

Deschutes County Code 5.08 requires the annual licensing of second hand dealers operating within the county. This application is for the license period July 1, 20___ to June 30, 20___. Please complete this application and return it to the **Deschutes County Sheriff** 63333 Highway 20 W., Bend 97703.

Prior to issuance of a license for a new business, a background check will be made for each person listed on the license application. Approval or disapproval will be granted by the Deschutes County Sheriff or their designee within 30 days. If your application is not approved, an explanation will be provided upon request.

PLEASE PRINT OR TYPE

Business Name _____

Business Address _____
Street City Zip Code

Business Mailing Address (if different) _____
Street City Zip Code

Business Phone _____

Owner's Name _____ Date of Birth _____
Last First Middle Initial

Owner's Address _____ Owner's Phone _____
Street City State Zip Code

List names, dates of birth, addresses, and phone numbers of any additional owners, partnerships, associations, and corporations on spaces below:

List addresses of all premises on which the business maintains its specified merchandise, its office, and the records required by ordinance if other than the address listed above for the business:

Has the owner or any person above ever been arrested or convicted of any crime other than minor traffic violations? Yes ___ No ___. If yes, please explain when and where _____

Please list two credit references and addresses: _____

Name of Bank or Savings and Loan and Account Number: _____

I/We swear the above application is true, complete and correct and I/we hereby authorize any person, firm, corporation or financial institution to release any information relating to the above to Deschutes County or its agents.

Dated this _____ day of _____, 20___.

Applicant(s) Signature _____, _____
 _____, _____

STATE OF OREGON)
) ss.
 COUNTY OF DESCHUTES)

On this _____ day of _____, 20___, personally appeared before me the above-named

and acknowledged the foregoing instrument to be _____ voluntary act and deed.

 Notary Public for Oregon
 My Commission Expires: _____

FOR OFFICE USE ONLY

Recommend Approval: YES NO _____ Date
Deschutes County Community Development

Recommend Approval: YES NO _____ Date
Deschutes County Sheriff

Recommend Approval: YES NO _____ Date
Deschutes County Clerk