Application for License

PURCHASE OF PRECIOUS METALS

This application is for businesses **INCORPORATED** in the State of Rhode Island

☐ New Application ☐ Renewal Application

All lines **MUST** be complete or N/A if not applicable. Application **MUST** be typed or printed.

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1. _____
NAME OF CORPORATION | DATE OF CORPORATION | STATE OF CORPORATION

2. _____
BUSINESS NAME | BUSINESS TELEPHONE NUMBER

3. _____
STREET ADDRESS | CITY | STATE | SIP

4. _____
NORMAL BUSINESS HOURS | DAYS OF OPERATION | DATE BEGINNING BUSINESS

5. _____
BRANCH NAME | STREET | CITY | STATE | ZIP | TELEPHONE

6a. _____
CORPORATE PRESIDENT | RESIDENCE ADDRESS | CITY | STATE | SOCIAL SECURITY | DATE OF BIRTH

6b. _____
CORPORATE VICE PRESIDENT | RESIDENCE ADDRESS | CITY | STATE | SOCIAL SECURITY | DATE OF BIRTH

6c. _____
CORPORATE SECRETARY | RESIDENCE ADDRESS | CITY | STATE | SOCIAL SECURITY | DATE OF BIRTH

6d. _____
CORPORATE TREASURER | RESIDENCE ADDRESS | CITY | STATE | SOCIAL SECURITY | DATE OF BIRTH

7. Do you buy goods other than at your office? If YES explain on line #15. YES ___ NO ___

8. Have you ever had refused, suspended or revoked a license, permit or identification card to operate a precious metals business or to act as an agent of such business in this state or lawful jurisdiction?
If YES, explain on line #15. YES ___ NO ___

9. Has any owner, partner, director, officer, member, or stockholder of the applicant's business ever had a license to operate as a precious metals business or operate as an agent of a precious metals business, refused, suspended, or revoked in either this state or any other jurisdiction?
If YES, explain on line #15. YES ___ NO ___

Please complete, sign and notarize the reverse side

10. Have you ever been arrested either in this state or any other jurisdiction?
If YES explain on line #15. YES ___ NO ___

11. Have you ever been convicted of a crime in either this state or any other jurisdiction?
If YES explain on line #15. YES ___ NO ___

12. Have you ever pled guilty or Nolo Contendre to any crime, charge or violation in this state or any other jurisdiction?
If YES explain on line #15. YES ___ NO ___

13. Have you knowledge of any individual associated with your precious metals business, either owner, partner, or principal corporate officer, being arrested or convicted of any offense in this state or any other jurisdiction?
If YES explain on line #15. YES ___ NO ___

14. Attach to this application a list of names, residential addresses, dates of birth and social security numbers of ALL agents or employees to be engaged in buying precious metals. NONE _____

15. _____

_____

_____

16. Have you ever been placed on probation for any crime, charge or violation in this state or any other jurisdiction?
If YES, explain on line #15. YES____NO____

I, the undersigned, have read and understand the provisions of title 6, chapter 11.1, inclusive, of the Rhode Island General Law pertaining to the regulation of the precious metals business and agents. I hereby apply for a license pursuant to the provisions of title 6, chapter 11.1 of the Rhode Island General Law and make oath to the truth and accuracy of all statements, answers, and representations made in this application, including all supplementary statements hereto attached. I acknowledge that any false or incorrect information contained within this application may subject me to criminal prosecution under Rhode Island General Law 11-18-1 and/or denial of my application for license for the purchase of precious metals.

Signature of applicant: _____ Date signed: _____

Subscribed and sworn to at _____, before me this ____ day of _____, 20___.

_____. My commission expires, _____.
NOTARY PUBLIC

Make check(s) payable to: Department of Attorney General (one check per fee).

Application fee..... $ 50.00 (This applies to NEW licenses **only**)
License fee..... $ 50.00 (This applies to NEW and RENEWAL)

Mail to: Department of Attorney General
Precious Metals Licenses
150 South Main Street
Providence, Rhode Island 02903

---------- **DO NOT WRITE BELOW THIS LINE** ----------

- ❑ BCI sent _____ by _____
- ❑ BCI rec'd _____ by _____
- ❑ SOS sent _____ by _____
- ❑ SOS received _____ by _____
- ❑ Cnd'l approval _____ by _____
- ❑ Final approval _____ by _____