



Coconino County
SHERIFF'S OFFICE
Jim Driscoll, Sheriff

PAWNBROKER LICENSE APPLICATION INSTRUCTION SHEET

The Coconino County Sheriff's Office is responsible for the administration and issuance of Pawnbroker License in accordance with Arizona Revised Statute 44-1627. In order to issue an initial or renewal license the following must be met:

1. Fill out the applicable forms:
 - a. Pawnbroker License Application
 - b. Affidavit of Fingerprint Integrity (if owners are out of state)
2. Per ARS 44-1627, all owners of a partnership or sole proprietor, and directors, agents, and any stockholder who owns 10% or more in a corporation will need to come in person to our office in order to provide a full set of fingerprints. Location is 911 E Sawmill Road, Flagstaff, AZ.
3. Submit a business check or money order to the Coconino County Sheriff's Office to include
 - a. \$1,000 initial license, pro-rated amount \$83 per month or \$500 renewal license
 - b. \$22 for each fingerprint card completed
4. Submit the Application, Affidavits(s), Fingerprint Card(s), License and Fingerprint Fee in person.
5. Please allow up to six weeks for the background check. This is completed by the Arizona Department of Public Safety, not our office.
6. If you will be handling firearms, you will need to contact the ATF for an application. If your business is located within a municipality, please check with them for any additional restrictions or requirements.

Licenses cannot be sold or transferred without approval from the Coconino County Sheriff's Office; a new license fee will apply. Any change request will need to be done in writing and submitted to this office. In order to process your paperwork in a timely manner, ensure that all questions on the application and Affidavit(s) are filled out completely. Please make copies of the enclosed Affidavit for each person required to submit one.

Applicants should be very familiar with all aspects involving the licensing of pawnbrokers and ensure that they and their establishment satisfy all the requirements as stated in Arizona Revised Statutes. One requirement of special note is that the agent or pawnbroker must be a bona fide resident of Arizona. Thank you for your attention to this matter, and if you have any questions or concerns, please feel free to contact our Administrative Team at 928-226-5012.



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APPLICATION FOR PAWNBROKER LICENSE

- NEW LICENSE RENEWAL LICENSE
- SOLE PROPRIETOR PARTNERSHIP CORPORATION

BUSINESS INFORMATION (PAWN SHOP):

BUSINESS NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

CORPORATION INFORMATION:

CORPORATION NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

OWNER/AGENT INFORMATION (AS REQUIRED BY ARS 44-1627) Must be a bona fide resident of AZ:

NAME _____

DATE OF BIRTH _____ CITY OF BIRTH _____ STATE _____

DRIVERS LICENSE# _____ STATE _____ SS# _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

Applicants should be very familiar with all aspects involving the licensing of pawnbrokers and ensure that they and their establishment satisfy all of the requirements as stated in Arizona Revised Statutes.

Note: All proprietors, partners, designated agents, corporate officers, directors, agents and any stockholders owning 10% or more of the corporation will be required on an annual basis to fill out an application to obtain or renew a Pawnbroker license in Coconino County. A background investigation will be performed on each person to ensure that the applicant has not, within the last five years, been



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convicted of a felony involving trafficking in stolen property, fraudulent schemes, forgery, theft, extortion, conspiracy to defraud or a felony involving moral turpitude. This is required to ensure that the applicant meets the requirements of Arizona Revised Statute 44-1627.H.

Please list below the names of each owner, corporate officer, designated agent and any stockholder owning 10% or more of the corporation. Fingerprints and notarized affidavits will be required for all persons listed below.

Name Ownership Percentage

I hereby give consent to the Coconino County Sheriff's Office and any other law enforcement agencies to investigate my background, including any law enforcement records, criminal history or records of any kind or description. I hereby waive any claim or cause of action regarding the use of my background information or law enforcement records that I may have against the Coconino County Sheriff's Office or its agents and employees against any other individual or agency disclosing or releasing background information to the Coconino County Sheriff's Office. I also certify that I am familiar with the Arizona Revised Statutes (44-1621 to 44-1632) governing the Pawnbroker license.

I hereby certify that all answers and information on this application are true and correct. Any false, misleading or incomplete information constitutes grounds for denial of this license.

SIGNATURE OF OWNER/AGENT

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____, 20__.

NOTARY PUBLIC

MY COMMISSION EXPIRES



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