



Precious Metals Employee Registration

NO FEE

Date _____

Name _____ Date of Birth _____

Driver's License Number _____ State of Issuance _____

Home Address _____

Home City, State, Zip _____

Home Phone Number _____ Alternate Phone Number _____

Email Address _____

Business Name _____

Business Address _____

Business City, State, Zip _____

Business Phone _____ Business Hours _____

Business Fax _____ Email Address _____

Applicant's Right Thumbprint:

Signature of Employee Taking Print

(Date)

(Signature of Applicant)

Approval of this application is determined by the Police Department.