



**COUNTY OF ORANGE**

**APPLICATION FOR SECOND HAND PRECIOUS METALS OR GEM DEALER**

Pursuant to Local Law #12 of 2009, any person wishing to engage in the business of a Second-Hand Precious Metals or Gem Dealer, must first procure a license from the Orange County Department of Consumer Affairs and Weights & Measures, 255 Main Street, Goshen, NY 10924

Please Print:

1. PERSON NAME: Last name /First name: \_\_\_\_\_

2. DBA / BUSINESS NAME: \_\_\_\_\_

3. ADDRESS: BUSINESS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

HOME: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. TELEPHONE: BUSINESS: \_\_\_\_\_

HOME: \_\_\_\_\_ CELL: \_\_\_\_\_

5. NATURE OF THE BUSINESS TO BE CONDUCTED: \_\_\_\_\_

6. THE APPLICANT IS AT LEAST 18 YEARS OF AGE. YES \_\_\_\_ NO \_\_\_\_

7. HAS THE APPLICANT, WITHIN THE PAST 10 YEARS, BEEN CONVICTED OF A CRIME OR VIOLATION OF ANY MUNICIPAL ORDINANCE? YES \_\_\_\_ NO \_\_\_\_

If yes, on a separate sheet of paper, give brief description of nature of offense and the punishment or penalty assessed.

**BY SIGNING BELOW, THE APPLICANT UNDERSTANDS THAT SUCH APPLICATION IS MADE UNDER PENALITIES OF PERJURY AND FURTHER ATTESTS THAT ALL THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND ANY FALSE OR MISLEADING INFORMATION IS PUNISHABLE AS A CLASS "A" MISDEMEANOR, SECTION 175.30 AND/OR SECTION 210.45 OF THE PENAL LAW AND SHALL MAKE THE APPLICATION NULL AND VOID.**

**BY SIGNING BELOW, THE APPLICANT AUTHORIZES THE COUNTY OF ORANGE AND THE DEPARTMENT OF CONSUMER AFFAIRS & WEIGHTS AND MEASURES OF THE COUNTY OF ORANGE TO INVESTIGATE THE FACTS SET FORTH IN THE APPLICATION AS REQUIRED TO MAKE A DETERMINATION AS TO THE PERSON'S QUALIFICATIONS TO OBTAIN A LICENSE.**

I hereby do solemnly swear that the information provided by me in this certificate is true and accurate to the best of my knowledge. I acknowledge that this statement is under oath.

Sworn before me this \_\_\_\_\_ day

Signature \_\_\_\_\_

of \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Notary Public, State of New York

**CHILD SUPPORT CERTIFICATION**  
**Orange County Department of Consumer Affairs**

**LICENSE BEING APPLIED FOR**

S	E	C	O	N	D		H	A	N	D		M	E	T	A	L	S	&	G	E	M	S			
---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	--	--	--

**THIS FORM MUST BE FULLY COMPLETED BY APPLICANT FOR APPLICATION TO BE VALID**

Last Name _____ First Name _____ Social Security Number _____ - _____ - _____ Date of Birth _____ / _____ / _____ <div style="text-align: center; font-size: small;">             Month                      Day                      Year         </div> Home Address _____  <div style="text-align: center;">             City _____ State _____ Zip _____         </div>
---

I, \_\_\_\_\_ being duly sworn, make the following statement:

- I am **NOT** under a court or administrative order to pay child support, **OR**
- I am under an obligation to pay child support. My account number is \_\_\_\_\_.
- If you choose the second above, put an "X" in front of the applicable statement:
- I do not owe arrears equal to 4 months or more of child support payments
- I have arrears equal to 4 or more months of child support payments, and one of the following statements applies to me (check the appropriate box)
  - I am making payments by income execution or by court agreed payment/re-payment plan or by a plan agreed to by the parties.
  - My child support obligation is the subject of a pending court proceeding
  - I am currently in receipt of Public Assistance or Supplemental Security Income, Case number \_\_\_\_\_
- I have arrears equal to 4 months or more of child support payment and none of the above statements apply to me.

I hereby do solemnly swear that the information provided by me in this certificate is true and accurate to the best of my knowledge. I acknowledge that this statement is under oath.

Sworn before me this \_\_\_\_\_ day                      X \_\_\_\_\_  
of \_\_\_\_\_, \_\_\_\_\_    Signature

\_\_\_\_\_  
Notary Public, State of New York    Date

## **INSTRUCTIONS**

### **for filing an application for an Orange County Precious Metals or Gem Dealer License**

Pursuant to Local Law #12 of 2009, any person wishing to engage in the business of a Second Hand Precious Metals or Gem Dealer, must be fingerprinted by the Orange County Sheriff's Office, prior to the issuance of a license.

Local Law #16 is available on [www.orangecountygov.com/County Departments/Consumer Affairs](http://www.orangecountygov.com/County%20Departments/Consumer%20Affairs).

You must submit the following to **Consumer Affairs, 255 Main Street, Goshen, NY 10924**:

1. Precious Metals or Gem Dealer Application, signed and notarized
2. Fee of \$200, in the form of a money order, made payable to "Orange County Commissioner of Finance"
3. Child Support Certification Form, signed and notarized
4. Surety Bond, in the amount of \$2,000
5. Certified copy of Trade Name Certificate, Partnership Cert, or Cert of Inc as filed with the Office of the County Clerk
6. Two 2" x 2" passport-style photographs

Upon receipt of the proper application, the Sealer will provide the applicant with an authorization form which will allow them to be fingerprinted by the Orange County Sheriff's Office, 110 Wells Farm Road, Goshen, NY 10924

Appointment is necessary. Call (845) 291- 7932 to make an appointment.