



BOROUGH OF PARAMUS
ONE JOCKISH SQUARE
PARAMUS, NJ 07652
(201) 265-2100

FEES ARE NON REFUNDABLE

Paramus License #: _____
 Paramus Police #: _____

Date of Application: _____ Amount: \$ _____ Date Paid: _____

Gold Buyers/Second Hand Buyers §359-1 **Are you registered with LeadsOnline? Yes or No**
If you are not registered with LeadsOnline please go to the website leadsonline.com and register.
Your application will not be approved until this is completed.

APPLICANT INFORMATION

APPLICATION MUST BE COMPLETED IN FULL- PLEASE PRINT

Name: _____ Date of Birth: ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____ Work Phone #: _____ Cell Phone #: _____

Eye Color: _____ Hair Color: _____ Social Security #: _____ - _____ - _____

CURRENT EMPLOYMENT

Company: _____ Years Employed: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

PRIOR EMPLOYMENT

Company: _____ Years Employed: _____

Address: _____ City: _____ State: _____ Zip: _____

Have you ever been convicted of a crime, disorderly person offense or violation of any municipal ordinances? Yes _____ No _____
If yes, please explain on back with date and location of incident.

REFERENCES

Name: _____	Name: _____
Address: _____	Address: _____
City/Town: _____	City/Town: _____
Phone #: _____	Phone #: _____

BRIEF DESCRIPTION OF THE NATURE OF THE BUSINESS AND GOODS TO BE SOLD OR BOUGHT

THIS LICENSE EXPIRES DECEMBER 31ST IN THE YEAR IN WHICH IT WAS ISSUED

The applicant states that the information submitted to the Mayor and Council of the Borough of Paramus is true and that he/she understands that any significant misstatements of any information hereby submitted shall constitute cause for a revocation of the license and permit.

APPLICANT'S SIGNATURE: _____ DATE: _____

APPROVALS	
BCI _____	Date: _____
Chief of Police _____	Date: _____
Mayor and Council _____	Date: _____