



License Division
2664 Riva Road
Annapolis, MD 21401

Second Hand Dealer License Application

SHD _____

Each person doing business as a second hand dealer is required to have a secondhand dealer license. The annual fee for the first licensee at a location is \$250; additional employees are \$50 each. Make your check payable to 'Anne Arundel County'. The license expires September 30 of each year. Attach a certificate of general liability of at least \$300,000 and property damage coverage of at least \$100,000. Please apply in person or by mail. If mailed, send a JPEG digital photograph to LicensePhoto@aacounty.org. Please include your name with JPEG.

Full Name of Applicant _____ Sex ____ DOB _____

Address: _____
Street city zip code

Driver's License Number _____ Place of Birth _____

Home Telephone Number _____ Daytime Telephone Number _____

E-Mail Address or Cell Phone Number _____

Are you a US Citizen? _____, If no, attach a copy of your employment authorization or permanent resident card.

Answer 'yes' or 'no' to the following questions:

If you answer yes to any of the following questions you must attach relevant documentation or explanation.

1. Are you a licensed: pawnbroker? _____; auctioneer? _____; or antique dealer? _____ If yes, write the license number(s) here: _____
2. Do you hold a Firearm Dealers License? _____
3. Do you hold a second hand precious metal license? _____ If yes, attach copies.
5. Have you ever been convicted, held liable or found to have committed acts involving moral turpitude, including any violation of federal, state or local law or regulation? _____
6. Have you ever had a judgment entered in an action for fraud, deceit or misrepresentation by any court of competent jurisdiction? _____
7. Have you ever had association with individuals known to have engaged in organized crime or racketeering? _____
8. Have you ever had a financial relationship with any persons known to have engaged in organized crime or racketeering? _____
9. Have you ever had direct managerial or supervisory control over an enterprise in which there was a pattern of cheating, fraud or employee dishonesty? _____
10. Have you ever engaged in any other conduct that might be a threat to the integrity of the business of secondhand sales? _____
11. Are you an owner or officer of this business? _____ Job Title _____

Name of Business _____ Bus. Phone # _____ Business Address _____

What items do you buy from the public: _____

Federal Employer ID Number: _____

I, the undersigned applicant, authorize Anne Arundel County to investigate any and all statements made in this application. I certify that the information herein is true and accurate to the best of my personal knowledge. I understand if any misrepresentations have been made herein or the results of the investigation are not satisfactory, then the license may be withdrawn or denied.

Signature

Date

Revised March 2019