



**APPLICATION/RENEWAL APPLICATION FOR  
SECONDHAND/PAWN RETAILER LICENSE  
CITY OF COVINGTON, KY – LICENSING DIVISION**  
Period Covered 5/1/20\_\_ through 4/30/20\_\_

All applicants must have a valid zoning permit before this application can be processed by the Covington Finance Department. No applicant shall be eligible for a license if he/she/it is delinquent or in default of an obligation to pay a tax, license fee, loan, fine, lien or other financial obligation to the City of Covington. An annual license fee of \$150 is required.

**IF ISSUED, THIS LICENSE MUST BE PUBLICLY POSTED AT YOUR PLACE(S) OF BUSINESS.**

Applicant Name:	DBA:
Covington Business Regulatory/Occupational License No.:	
Applicant Social Sec. No. and DOB, if applicable:	Email Address:
Applicant Address:	Phone:
Business Address:	Business Phone:
Owner of Building:	Owner's Address:

If this is a Corporation or LLC, list all officers and stockholders.  
If this is a Partnership, list all associates. Please use reverse side if necessary.

Name:	Address:	Social Sec. No.:	DOB:	Phone:	Email Address:

The undersigned affirms that all applicable City of Covington licenses, fees, taxes, fines, liens and loan payments concerning the applicant and the business to be licensed are current and/or paid in full. Further, the applicant affirms that he/she/it is familiar with the applicable requirements of the City of Covington ordinances governing pawn and second hand retailers. The applicant understands that a Secondhand/Pawn Retailers License is not a property right, and acknowledges the permit may be revoked or suspended at any time, pursuant to the law.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security No. or Federal ID

On this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, to me personally appeared \_\_\_\_\_, to me known to be the person described herein, who executed the foregoing instrument, and she/he acknowledged that she/he voluntarily executed the same. Subscribed and sworn to before me a Notary Public, in the County of \_\_\_\_\_, Commonwealth of Kentucky on the aforementioned date.

(seal)

Notary Public \_\_\_\_\_

My Commission Expires \_\_\_\_\_

FOR FINANCE DEPARTMENT USE ONLY

SECONDHAND/PAWN RETAILER LICENSE NUMBER - \_\_\_\_\_

LICENSE COPY SENT TO COVINGTON POLICE DEPARTMENT - \_\_\_\_\_ (Date)