

PAWN SHOP SUPPLEMENTAL APPLICATION

1. Named Insured: _____
2. Are you bonded? Yes No
3. Has your license ever been suspended or revoked within the past 5 years? Yes No
4. Describe your hiring procedures: _____

5. Has any employee or owner ever had any prior convictions for illegal activities? Yes No
6. Do you sell firearms? Yes No
If yes, what are your receipts? _____
What is the percentage of total receipts that firearms constitute? _____
7. Do you or any employee carry a firearm on the premises? Yes No
8. Do you pawn or sell autos, watercraft, recreational vehicles or any other type of motorized unit? Yes No
If yes, please describe: _____
9. Are more than 25% of sales generated from the titles of autos, boats, motorcycles or recreational vehicles?
 Yes No
10. Is coverage requested for pawned items? Yes No
11. Do you have a U.L. approved safe? Yes No
If yes, describe the safe and include the certificate number: _____
12. How are the values of items established? _____
13. How is stock inventory kept? Computer Manual
14. How often is the inventory updated? _____
15. Are copies of the inventory stored off-site? Yes No
16. Do you offer any guarantees or warranties? Yes No
If yes, explain: _____

Signature of applicant: _____

Date: _____