

**City Of Middletown, Ohio**  
**SWAP SHOP/SECOND HAND DEALERS**  
**License Application**

Name of Applicant \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current Ohio Driver's License No. \_\_\_\_\_ Age \_\_\_\_\_

Business Name _____	
Business Owner Name _____	
Business Location _____	Phone _____
City, State, Zip Code _____	
Is your business operating as a corporation, partnership, sole proprietorship or unincorporated association? Please Specify _____	
Name of Entity _____	
Name of Agent _____	
Address of Agent _____	
Phone No. of Agent _____	SSN of Agent _____

Please list all employees, independent contracts and/or volunteers who are authorized to operate your business:

Name	Address	SSN
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list all incorporators, owners, officers, directors, or any other person having an ownership interest in the business:

Name	Address	SSN

Describe all articles to be purchased, sold or exchanged \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NAMES AND ADDRESSES OF TWO (2) PERSONS WHO WILL VOUCH FOR THE SOBRIETY, HONESTY AND GENERAL GOOD CHARACTER OF THE APPLICANT, WHO RESIDE IN EITHER THE CITY OF MIDDLETOWN, COUNTY OF BUTLER, OR THE STATE OF OHIO.**

Name	Address	Phone

\_\_\_\_\_  
**Signature of Applicant** \_\_\_\_\_  
**Date**

A criminal record check must be completed for applicant and all employees.  
Completed applications are to be taken to the Middletown Police Department Central Records Section. Once the application has been approved, you may then call Detectives at 513-425-7738 to make arrangements to pick up the license and ID badge.  
All licenses expire on 12/31 of year issued, renewal is required.

Approved     Disapproved \_\_\_\_\_ **Chief of Police**    Date \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_  
Name SS# DOB

having made application for a Swap Shop/Second Hand Dealer's License from the City of Middletown, I hereby authorize the City of Middletown to investigate and to ascertain any and all information which may concern a criminal records check and including but not limited to confidential investigatory material and/or records involving police or court contacts when the applicant was a minor.

I hereby release the custodian or custodians of such criminal investigatory records, the City of Middletown, its agents, employees, and representatives in any capacity, and its Division of Police from any and all claims of liability or damage of whatever kind or nature, which at any time could result to me, my heirs, assigns, associates, personal representative(s) of any nature because of compliance by said City, its employees, agents or representatives and Division of Police with this Authorization For Release of Information.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_

MIDDLETOWN POLICE DEPARTMENT

SWAP SHOP/SECOND HAND DEALER RECORD OF TRANSACTION:  
 AUTHORITY: SECTION 02009-100 CODIFIED ORDINANCES

Business Name \_\_\_\_\_ Date of Transactions \_\_\_\_\_

Item description/type of item	Brand Name/Serial Number/Model Number/Words, dates or initials on property	Amount of Money given or received for property
Name of person from whom articles were received or when articles were sold by Swap Shop	Address	Date of Birth Oper Lic/State ID#

Item description/type of item	Brand Name/Serial Number/Model Number/Words, dates or initials on property	Amount of Money given or received for property
Name of person from whom articles were received or when articles were sold by Swap Shop	Address	Date of Birth Oper Lic/State ID#

Item description/type of item	Brand Name/Serial Number/Model Number/Words, dates or initials on property	Amount of Money given or received for property
Name of person from whom articles were received or when articles were sold by Swap Shop	Address	Date of Birth Oper Lic/State ID#

I, \_\_\_\_\_ do attest that all the information is accurate to the best of my knowledge  
 (print name of dealer)

\_\_\_\_\_ Date & Time Submitted \_\_\_\_\_  
 (signature of dealer)