

**Town of Niskayuna**  
**Office of the Town Clerk**  
One Niskayuna Circle  
Niskayuna, NY 12309  
518-386-4510

DATE \_\_\_\_\_

LICENSE NO. \_\_\_\_\_

(Official Use Only)

## APPLICATION FOR SECONDHAND DEALER LICENSE

Pursuant to Chapter 169 of the Town Code of the Town of Niskayuna

- Complete application with notarized signature(s)
- \$250 Annual License Fee
- \$2,500 Surety Bond to the Town of Niskayuna

This application is for a license to conduct the business of a Secondhand Dealer in the Town of Niskayuna, New York, subject to all Local Laws, Ordinances and Resolutions pertaining to this subject now in force or hereafter to be adopted by the Niskayuna Town Board.

INDIVIDUAL MAKING APPLICATION: \_\_\_\_\_

BUSINESS	
NAME OF BUSINESS:	
STREET ADDRESS:	
CITY / STATE:	YEARS AT THIS LOCATION:
BUSINESS PHONE(S):	CELL PHONE(S):
CHARACTER OF BUSINESS (describe in detail the nature of articles to be purchased/sold):	
TYPE OF BUSINESS (i.e. firm, partnership, association, corporation, etc.):	
HAVE YOU PREVIOUSLY BEEN A DEALER IN SECONDHAND ARTICLES?    YES ( )    NO ( )	
IF YES, GIVE LOCATION(S) AND YEARS IN EACH LOCATION:	
Any changes to the above information during the licensing year must be reported to the Niskayuna Town Clerk and are subject to Zoning approval.	

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<b>ALL INTERESTED PARTIES</b>	
List all names and addresses of applicant, partners, officers and employees (attach additional sheets if necessary). Any changes during the licensing year must be reported to the Niskayuna Town Clerk.	
NAME:	
STREET ADDRESS:	
CITY / STATE / ZIP:	
DATE OF BIRTH:	
ARE YOU A RESIDENT OF THE TOWN OF NISKAYUNA?	YES ( ) NO ( )
IF YES, HOW LONG HAVE YOU RESIDED IN THE TOWN OF NISKAYUNA?	
HAVE YOU WORKED AS A SECONDHAND DEALER BEFORE?	YES ( ) NO ( )
If yes, list location(s) and years at each location (use extra pages if necessary):	
<b>LOCATION</b>	<b>YEARS</b>
<b>PREVIOUS EMPLOYMENT: COMPANY / ADDRESS / PHONE</b> (may use extra pages if necessary)	<b>YEARS</b>
Have you ever been convicted of a crime, misdemeanor or violation of any municipal ordinance or local law?	YES ( ) NO ( )
If yes, list what crime(s), misdemeanor(s) or violation(s) and what was the punishment or penalty assessed thereof (may use extra pages if necessary):	
<b>NATURE OF OFFENSE</b>	<b>PUNISHMENT OR PENALTY RECEIVED</b>

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POLICE VERIFICATION	
The credentials of the applicant(s), partner(s), officer(s) and/or employee(s) of the business have been checked by the Niskayuna Police Department, and based upon the information provided by said Department, the license is:	( ) Approved ( ) Disapproved
SIGNATURE:	DATE:
Daniel McManus, Chief of Police	

FIRE DISTRICT VERIFICATION	
The authorities of the local Fire District have inspected the business to ascertain precautions have been taken to guard against danger from fire, both from within and without the premises named in this application.	
DATE OF INSPECTION: _____	PASS ( ) FAIL ( )
SIGNATURE:	DATE:
TITLE:	

SITE PLAN REVIEW
The required site plan review has been conducted according to Niskayuna Town Code.
Signature:
Town Planner

LICENSE CERTIFICATION
The requirements specified under Niskayuna Local Law, Chapter 169 have been satisfied.
SIGNATURE:
Michele M. Martinelli, Town Clerk

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STATE OF NEW YORK }  
COUNTY OF SCHENECTADY } SS.:

I have been provided with a copy of Chapter 169 of the Niskayuna Town Code, titled Secondhand Dealers and I agree to abide by all the provisions as it pertains to the license I have applied for by and through this application.

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

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me personally came  
\_\_\_\_\_ personally known to me or proved to me on the basis of  
satisfactory evidence to be the individual whose name is subscribed herein.

\_\_\_\_\_  
Notary