



# Plainfield Police Department

"Honorable Service"

Chief of Police, Michael G. Surprenant

210 Norwich Rd. Plainfield, CT 06374  
(860)564-0804 fax (860)564-0808

[www.plainfieldctpolice.com](http://www.plainfieldctpolice.com)

APPLICANT'S  
**PHOTO**

## EMPLOYEE APPLICATION

CIRCLE ALL THAT APPLY

**Pawnbroker**

**Precious Metals (Coins & Gems)**

**Secondhand Dealer**

**Employees Name:** \_\_\_\_\_  
Last, First MI

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
Application Date

**Home Address:** \_\_\_\_\_  
Number Street City/Town State Zip

**Contact Phone:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**Business Phone:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_

### LIST ANY OTHER PLACES OF RESIDENCE DURING THE PAST (5) YEARS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Driver's License Number/State:** \_\_\_\_\_

**Social Security Number** \_\_\_\_ - \_\_\_\_ - \_\_\_\_ **Place of Birth:** \_\_\_\_\_

### Criminal History-List all crimes if applicable in which you have been convicted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of Business:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_  
Number Street City/Town State Zip

### Requirements

1. All employees shall submit colored photocopies of the following documents at the time of their application:

- (a) Current driver's license;

Applicant's Initials: \_\_\_\_\_

(b) One (1) "**ORIGINAL**" current passport size photograph. **NO CROPPING of regular size photographs**

- 2. All employees are also required submit to a state and national criminal history check and complete the employee application. His/her fingerprints must be taken at the Plainfield Police Department only. The cost of the background investigation is **\$87.00**. This fee must be paid only with a money order or bank check. In the event the employee is denied, this fee is non-refundable.
- 3. All employees of a licensed pawnbroker, secondhand dealer, or precious metals, gemstone, or coins dealer are required to follow policies of the Plainfield Police Department and shall comply with all regulations and requirements containing in the Connecticut General Statutes.

**Endorsement**

I hereby certify that the information provided is true and accurate. I understand that if I have falsified any information in this application or on the attached \_\_\_\_\_ pages, I will not be entitled to the license sought or this license may be revoked or suspended, after notice and hearing, if information is found to be false after the license has been issued. I fully understand that if I intentionally make a statement that is untrue and which is intended to mislead a public servant in the performance of his or her official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes for False Statement and may be subject to arrest.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature of Applicant: \_\_\_\_\_

(Must be signed in the presence of a Notary Public)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, in accordance with the Connecticut General Statutes.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Print Name of Notary Public

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

\*\*\*\*\*POLICE USE ONLY\*\*\*\*\*

**APPROVED:** YES \_\_\_\_\_ NO \_\_\_\_\_ (SEE ATTACHED/BELOW) **DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Signature of Chief of Police or Designee

\_\_\_\_\_  
Print Name of Chief of Police or Designee

Applicant's Initials: