



Registration Application for Secondhand Dealers and Secondary Metals Recyclers

**DR-15
R. 01/17**

Rule 12A-17.005
Florida Administrative Code
Effective 01/17

Business Partner Number - This number is located on the back of your sales and use tax Certificate of Registration (Form DR-11).	Business Identification Number - Provide the Federal Employer Identification Number (FEIN) of the business or Social Security Number (SSN) * of the business owner.	
Business Partner Number	FEIN	SSN*

* Social security numbers (SSNs) are used by the Florida Department of Revenue as unique identifiers for the administration of Florida's taxes. SSNs obtained for tax administration purposes are confidential under ss. 213.053 and 119.071, F.S., and not subject to disclosure as public records. Collection of your SSN is authorized under state and federal law. Visit our Internet site at www.myflorida.com/dor and select "Privacy Notice" for more information regarding the state and federal law governing the collection, use, or release of SSNs, including authorized exceptions.

Business Structure and Ownership (check one):	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company	
Document number issued by the Florida Secretary of State when the entity was chartered or authorized to conduct business in Florida:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of Florida incorporation, formation, organization or date of authorization to conduct business in Florida:	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Legal name of business entity (individual owner, corporation, limited liability company, or partnership):	
Trade, Fictitious, or "doing business as" name (if different than above):	
Mailing address _____	
City _____ State _____ ZIP _____	
Telephone Number: (____) _____ Email Address: _____	
Your email address is treated as confidential information (section 213.053, F.S.), and is not subject to disclosure of public records (section 119.071, F.S.).	

Ownership Information: Provide the full name, title, SSN, address and telephone number of each business owner, officer, member, director, partner, and stockholder with a controlling interest. Make copies of this page if additional space is needed.

Name	SSN	Street address City/State/ZIP or Postal Code/Foreign Country	Telephone number
Title			
	- - - - -		(- - -) - - - - -
	- - - - -		(- - -) - - - - -
	- - - - -		(- - -) - - - - -
	- - - - -		(- - -) - - - - -

For DOR Office Use Only

Approved
 Denied
 By: (User ID) _____ Date: _____



Business Partner Number: _____

Location Information Provide your **Sales Tax Certificate Number** for this location: _____ - _____ - _____

This application* is for:
 Secondhand Dealer **Mail-in Secondhand Precious Metals Dealer** **Automated Kiosk Secondhand Dealer** **Secondary Metals Recycler**

Location Business Name _____

Physical street address (Do not use PO Box) _____

City _____ County _____ State _____ ZIP _____

For this location enter the total number of licenses applied for: _____

***Include a \$6 fee for each location and each license type.**

Location Information Provide your **Sales Tax Certificate Number** for this location: _____ - _____ - _____

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Total number of locations and license types included in this application:	<input type="text"/>	X \$6.00 =	Application Fee Amount Enclosed:	<input type="text"/>
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Under the penalties of perjury, I declare that I have read this application and that the facts stated in it are true.

Signature of Applicant Title Date

This application must be signed by an owner, officer, member, partner, director, or stockholder with a controlling interest in the business entity.

You will NOT be issued a Certificate of Registration if:

1. You are not registered to file and pay Florida sales and use tax.
2. You are younger than 18 years old.
3. **You are applying for a secondhand dealer license** and within the preceding 10 years, any business owner, officer, member, director, partner, or stockholder with a controlling interest in the company was convicted of, or entered a plea of guilty or nolo contendere to, or had adjudication withheld for, a crime against the laws of Florida or any other state in the United States relating to registration as a secondhand dealer or involving theft, larceny, dealing in stolen property, receiving stolen property, burglary, embezzlement, obtaining property by false pretenses, possession of altered property, any felony drug offense, any violation of s. 812.015, F.S., or any fraudulent dealing.
4. **You are applying for a secondhand dealer license** and any business owner, officer, member, director, partner, or stockholder with a controlling interest in the company ever had a final judgment entered against them in civil action upon grounds of fraud, embezzlement, misrepresentation, or deceit.
5. **You are applying for a secondary metals recycler license** and:
 - (A) Within the preceding 24 months, any business owner, officer, member, director, partner, or stockholder with a controlling interest in the company was convicted of, or entered a plea of guilty or nolo contendere to, a felony committed against the laws of Florida or any other state in the United States involving theft, larceny, dealing in stolen property, receiving stolen property, burglary, embezzlement, obtaining property by false pretenses, possession of altered property, any felony drug offense, or of knowingly or intentionally violating the laws of Florida relating to registration as a secondary metals recycler, or
 - (B) You are registering a business location that does not meet the definition of a "fixed location." Section 538.18, F.S., defines "fixed location" to mean any site occupied by a secondary metals recycler as owner of the site or as lessee of the site under a lease or other rental agreement providing for occupation of the site by the secondary metals recycler for a total duration of not less than 364 days.



This page may be photocopied to provide additional location information.

Business Partner Number: _____

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