

Oklahoma Department of Agriculture, Food & Forestry
Consumer Protection Services Division
PO Box 528804
Oklahoma City, OK 73152
Phone: 405/522-5968 FAX: 405/522-4584

Oklahoma Scrap Metal Dealer License Application

Type of Application: Individual _____ Firm, corporation or other legal entity _____
(Please check one)

Company or Facility Name: _____

Name of Applicant: _____

Mailing Address: _____

Physical Address: _____

City: _____ State: _____ Zip: _____ County: _____

Email Address: _____

Office Phone Number (____)____-____ Cell Phone Number (____)____-____

Sales Tax Identification Number: _____

Have you or your firm ever had a license refused, revoked or suspended? Yes _____ No _____

Have you ever been convicted of, or pled guilty or nolo contendere to any felony or to a misdemeanor involving moral turpitude or dishonesty? Yes _____ No _____

If yes please provide date, subject matter & court or government entity by which the above are marked and explain: _____

Signature of Applicant

Date

(Note: A separate application and license is required for each location or yard).

You must enclose the following with the application:

- Legal proof of ownership, lease agreement or contract for the business location;
- Proof of a dedicated telephone line for the business location;
- Proof of general liability insurance policy of not less than \$500,000 for the business location;
- Proof of a current discharge permit issued pursuant to the provisions of the Oklahoma Pollutant Discharge Elimination System Act;
- Two (2) full sets of fingerprints and a photo ID to be used for a national criminal history record check.
 - Applicant Notification:
 - o Fingerprints will be used to check the criminal history records of the OSBI and FBI.
 - o You will be provided the opportunity to complete, or challenge the accuracy of any Criminal History information found.
 - o If there is a criminal history in question you will be given the opportunity to change, correct or update any information by notifying the appropriate arresting agency or court clerk.
 - o The FBI will retain your fingerprints and associated information/biometrics and, while retained, your fingerprints will continue to be compared against other fingerprints submitted to or retained by the FBI.

You must also enclose the following fees with the application:

- \$100 Application Fee;
- \$100 Investigative Fee;
- \$41 National Criminal History Records Check Fee.

Rev Code: 359 METHOD OF PAYMENT: ____Cash ____Check ____ Money Order ____Credit Card
Credit Card No: _____ Type of Card: Visa / Master Card / Discover
Expiration Date (MM/YYYY) _____ Signature_____

Oath of Accuracy

I certify under penalty of law that this document and all attachments are to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for knowingly submitting false, inaccurate, or incomplete information.

Please Print Name and Title

Signature

Signed or attested before me this _____ day of _____, 20_____

(NOTARY SEAL)

Notary Public

My Commission Expires: _____

Affidavit of Lawful Presence

All natural persons fourteen(14) years of age or older and present in the United States, applying for a license with the Oklahoma Department of Agriculture for a Scrap Metal Dealer License are required by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Oklahoma Department of Agriculture, Food & Forestry with verification of lawful presence in the United States by executing one of the statements below.

I, _____, of lawful age, being first
(PRINT Applicant's Name)
duly sworn, upon oath states, under penalty of perjury as follows:

- I am a United States Citizen.**

- I am a qualified alien** under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States.

Provide a copy of your Passport/Visa/Alien Registration document and write the number & expiration

date: _____

United States Citizen or Qualified Alien's Signature

Signed or attested before me this _____ day of _____, 20_____

(NOTARY SEAL)

Notary Public

My Commission Expires: _____