

Weights and Measures
Phone: 845-808-1617 Fax: 845-808-1930

Dear Business Operator:

By approval of the Putnam County Legislature, Chapter 195 of the Putnam County Code has been revised and adopted into law. Secondhand Precious Metal and Gem dealers operating in Putnam County are now required to be licensed with the Office of Consumer Affairs. A copy of Chapter 195 is enclosed for your review and convenience. Also enclosed is the license application along with instructions.

If you have reason to believe that your business should not be subject to the provisions of this law, please submit your reasons in writing to the Office of Consumer Affairs at the address below, within 10 days of receipt of this letter.

With advancements in point of sale technology now available and in consideration of the ever increasing costs associated with previously required manual reporting, the newly revised law requires your business to use a specified web based program "Leads on Line", which will be provided for your use at no charge.

Businesses and law enforcement agencies will benefit from enhanced efficiencies and better processes that will assist in providing safer communities. Our office, along with law enforcement officials in our County, are committed to working with you as together we implement and use this new technology and methods of reporting.

In order to provide direct assistance to our Putnam County businesses that are now required to use this new web based program, Mr. Russell House, has been named by "Leads on Line" as your designated contact. His contact information is — rhouse@leadsonline.com — his direct phone number is 972-331-6789 or toll free number 800-311-2656. The general website for "Leads on Line" is www.leadsonline.com. If you have not already been contacted by Mr. House, please feel free to give him a call.

Please feel free to contact our office at (845) 808-1617, ext. 46109 and speak with our Weights and Measures Inspector, Eric Geiss, should you have questions or need further information.

We look forward to working with you to insure a successful implementation of this licensing program and on line reporting system requirement. Our desire is for both your business and our community to benefit from the changes to the law.

Recognizing our shared responsibilities and commitment to provide a fair and balanced consumer marketplace, I thank you in advance for your cooperation.

Sincerely,

Michael Budzinski, PE

Director



Weights and Measures 110 Old Route 6, Building #3 Carmel, NY 10512

Phone: 845-808-1617, x46109 or x46111

Fax: 845-808-1930

PRECIOUS METALS

THE FILING OF AN APPLICATION DOES NOT CONSTITUTE PERMISSION TO OPERATE. A LICENSE MUST ACTUALLY BE IN POSSESSION OF THE LICENSEE BEFORE ANY OPERATION MAY BE LEGALLY CONDUCTED.

Failure to complete the required information or the giving of false information in the application may result in the denial of said application for a license or any renewal thereof, as well as cancellation or revocation in the event such license has been issued.

FALSIFICATION OF ANY STATEMENT MADE HEREIN IS AN OFFENSE PUNISHABLE BY A FINE AND/OR IMPRISONMENT.

The licensing provided shall apply solely to Chapter 195 of the Code of Putnam County and the issuance of a license is subject to verification under the requirements of this local law.

- 1) <u>THE APPLICATION</u> must have all questions answered accurately and completely, **signed before a Notary Public** and thereafter filed with this Office.
- 2) <u>INDIVIDUALS</u> operating under a trade name shall submit a <u>certified copy</u> of the **trade name certificate** filed in the Putnam County Clerk's Office.
- 3) <u>PARTNERSHIPS</u> shall submit a <u>certified copy</u> of the **partnership certificate** filed in the Putnam County Clerk's Office.
- 4) <u>CORPORATIONS</u> shall submit a copy of its **certificate of incorporation** and, if a foreign corporation, its application for authority to do business in New York State. A corporation shall also furnish the name, address and title of an officer of the corporation or designated agent of service upon whom process or other legal notices may be served.
- 5) The applicant will be required to describe exactly the type of business that the applicant intends to conduct.
- 6) The applicant will submit the name and address of the owner(s) of the business premises and state whether or not the business premises are owned or rented, and if rented from whom.
- 7) <u>PHOTOS</u>: Please email a head and shoulders photo to: <u>ERIC.GEISS@PUTNAMCOUNTYNY.GO</u>V. The photo, taken with the past 60 days, will be required as follows:
 - An individual;
 - All partners in a partnership;
 - Corporate officers who are authorized to enter into a contract;
 - All stockholders of ten (10) percent or more of stock; and
 - All other personnel dealing with the public in connection with the execution of a contract.

PLEASE LABEL EACH PICTURE

- 8) <u>JUDGMENTS</u>: List all unsatisfied judgments in which the applicant, partner(s), or if a corporation, each officer and stockholder are named as judgment debtor.
- 9) <u>CRIMINAL CONVICTIONS</u>: List all criminal convictions within the last ten (10) years, except minor traffic violations of the applicant, partner(s) or if a corporation, each officer and stockholder of ten (10) percent or more of stock.
- 10) <u>LICENSE FEE</u>: A \$250.00 check or money order made payable to the **Putnam County Commissioner of Finance**. Credit card payments may be made in person at the Consumer Affairs office.
- 11) <u>LICENSE & PERMIT BOND</u>: An original License & Permit bond in the amount of \$5,000 must be submitted with this application. A sample of the bond wording is enclosed for your insurance agents review.
 - The bond must be for a one year period with an expiration date that corresponds within 30 days of the registration expiration date.
 - Putnam County Office of Consumer Affairs must be listed as the obligee.
 - The bond must be signed by the principal.
- 12) <u>ROSTER OF EMPLOYEES</u>: Each licensee must submit a roster of his agents, employees or duly authorized representatives.
- 13) Applicants who are not required by law to carry worker's compensation and/or disability benefits insurance should submit Form CE-200 or the Affidavit of Compliance. The CE-200 form can be filled out electronically on the NYS Worker's Compensation Board website at: http://www.wcb.ny.gov/. Print a finished form to submit with your application. Paper forms are available but estimated processing time for paper applications is four weeks.
- 14) You must submit copies of the following certificates:
 - Federal Employer's ID Number
 - NYS Tax ID Number
 - NYS Employer's ID Number
 - NYS Sales Tax Authorization Number
- 15) Each applicant must complete and submit a completed <u>Child Support Certification</u> with their application pursuant to NYS General Obligation Law §3-503. If a business partnership, each partner must submit Child Support Certification. Corporations are exempt from this requirement.

LICENSE IS NOT TRANSFERABLE



Weights and Measures/Trades Licensing and Registration 110 Old Route 6, Building #3 Carmel, NY 10512

<u>Phone</u>: 845-808-1617, x46109 <u>Fax</u>: 845-808-1930

APPLICATION FOR LICENSE AS A DEALER OF SECONDHAND PRECIOUS METALS AND GEMS

COMPLETE BOTH PAGES: ANSWERS TO ALL QUESTIONS MUST BE ACCURATE, COMPLETE AND LEGIBLE

| | | ECK BOX TO INDICATE TYPE | OF OWNERSHIP | |
|--------------------------|-------------------------------------|---------------------------------|---------------------------------|--|
| | ☐ Individual Owner | ☐ Partnership | Co | orporation |
| Name of Business: | | | | |
| _ | splay Name: | | | _ |
| Business Physical Add | · · | | | |
| business Filysical Aut | · | | State | |
| Dusings Dhana Num | | | | |
| | ber: | | | |
| | | | | |
| Contact Email: | | | | |
| | | | | |
| Name of Applicant (L | ast, First, Middle): | | | |
| Home Address: | Street | | | |
| | City | | State | ZIP |
| Home Phone Numbe | r: | | | |
| Date of Birth (MM/DI | D/YYYY): | Sex: M 🔲 F 🔲 | Social Security Number: | |
| Partnership: Yes | No | | | |
| If Yes, list name and a | ddress of each Partner: | | | |
| Name: | | Address: | | |
| Name: | | Address: | | |
| Corporation: Yes | No | | | |
| *If Yes, list name, titl | e and address of any officer of the | e Corporation or designated age | ent of service upon who process | s of other legal notice may be served: |
| Name: | | Corporate Title: | | |
| Address: | | | | |
| Name: | | Corporate Title: | | |
| Address: | | | | |
| Tax Identification Info | ormation MUST PRO | IVIDE COPIES OF CERTIFICATES | FROM ISSUING AGENCY | |
| Federal Employer ID | Number: | NYS Emp | oloyer's ID Number: | |
| NYS Tax ID Number: | | | | |
| | type of business applicant intends | <u> </u> | | |
| Describe exactly the | уре от вазтезз аррпсанственаз | s to conduct. | | |
| 5 11 11 1 | | | | |
| Does the applicant or | , | he business premises? | | |
| ir the applicant rents | give the name and address of the | e person from whom you rent: | | |
| | | | | |
| Name: | Address: | | | |
| *LIST OF ANY OTHER | LOCATIONS WHERE BUSINESS M | AY BE CONDUCTED | | |
| Business Name: | | | | |
| Address: | | | | |
| Business Name: | | | | |
| Address: | | | | |
| Business Name: | | | | |
| Address: | | | | |

*YOU MAY USE ADDITIONAL SHEETS IF NECESSARY

LIST ALL UNSATISFIED JUDGMENTS in which the applicant, partner(s) or if a corporation, each officer are named as judgment debtors. If none, so state. (Use extra sheets if necessary). Date Name of Judgment Debtor Name of Judgment Creditor **Disposition-Court and Date** LIST ALL CRIMINAL CONVICTIONS within the last ten (10) years except minor traffic violations of the applicant, partner(s) or if a corporation, each officer. If none, so state. (Use extra sheets if necessary). Name of Judgment Debtor Name of Judgment Creditor **Disposition-Court and Date** Date Please provide address where business is to be conducted on specific dates if different than business address (i.e.- Trade Shows, Flea Markets, etc.): ______ Dates (From/To): _____ 2. Dates (From/To):______ YOU ARE REQUIRED TO NOTIFY THIS OFFICE IMMEDIATELY OF ANY CHANGE(S) IN THE INFORMATION SUPPLIED BY YOU ON THIS APPLICATION. In consideration of being granted this license, it is agreed that the applicant(s) will comply with the rules and regulations of Putnam County. I certify that the information on this application is true and accurate and understand that any incomplete, inaccurate or false information may cause the registration to be delayed, denied, suspended or revoked. PENALTY FOR FALSIFICATION: Falsification of any statement made herein is an offense punishable by fine and/or imprisonment. Signature of Applicant Date SWORN TO BEFORE ME THIS DATE: **NOTARY STAMP:** SIGNATURE OF NOTARY PUBLIC

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

 FEE RECEIVED:
 LICENSE NUMBER:

 DETERMINATION:
 DATE LICENSE ISSUED:

 CHECK #:
 SRB #:

Division of Safety and Health License and Certificate Unit Harriman State Office Campus Building 12, Room 161A Albany NY 12240 (518) 457-2735

WE ARE YOUR DOL



www.labor.ny.gov license&certifcate@labor.ny.gov

Appendix to a License/Certificate Application

The child support obligations
(New York State General Obligations Law Title 5 section 3-503)
do not apply to corporations.

Complete, sign and date this form if you are applying for a license/certificate or license/certificate renewal.

| Αŗ | oplicant's Information | | | | |
|------------------|--|---|---------------------|------------------|--|
| Last name: First | | First name: | N | .Middle initial: | |
| Sc | ocial Security number: | | | | |
| Th | e type of license/certificate requested: | | | | |
| Βι | usiness: | Title: | | | |
| Ce | ertification | | | | |
| Ar | e you under an obligation to pay child sup | port? If yes, complete items 1 - 4. | ☐ Yes | ☐ No | |
| 1. | I am making payments in accordance w | ith a plan agreed upon by the parties. | ☐ Yes | ☐ No | |
| 2. | I am four months or more behind in the | payment of child support. | ☐ Yes | ☐ No | |
| 3. | My child support obligation is the subject | ct of a pending court proceeding. | ☐ Yes | ☐ No | |
| 4. | I am receiving public assistance or supp | plemental security income. | ☐ Yes | ☐ No | |
| Wa | | child support or have failed to comply pport proceeding, you may be subject | | | |
| Αf | firmation | | | | |
| Ιa | cknowledge that giving false information i | s a crime and may result in this license/ce | ertificate being re | evoked. | |
| Sic | anature: | Date: | | | |



Weights and Measures/ Trades Licensing and Registration 110 Old Route 6, Building #3 Carmel, NY 10512

| | | | License No.: |
|-----------------------|--------------------|---------------------------------|----------------|
| | | ROSTER OF EMPLOYEES | |
| | | Please Type or Print | |
| APPLICANT:Indiv | idual 🗆 | Partnership | Corporation |
| muiv | riuuai 🗀 | Partilership 🗀 | Corporation |
| TRADE NAME: | | | |
| BUSINESS PHYSICAL A | ADDRESS: | | |
| | | | |
| The Applicant must li | ist his agents, em | ployees or duly authorized re | presentatives. |
| NAME | TITLE | RESIDENT ADD | RESS SIGNATURE |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | USE A | ADDITIONAL SHEET IF NECESSA | ARY |
| | | | |
| Nate: | | | |

NOTICE MUST BE GIVEN TO THIS OFFICE IMMEDIATELY OF ANY CHANGE IN PERSONNEL

Signature & Title of Applicant

AFFIDAVIT OF COMPLIANCE WITH THE REQUIREMENTS OF NEW YORK STATE WORKERS' COMPENSATION LAW

| STATE (| OF NEW YORK |) | |
|------------|--------------------------|-------------|---|
| COUNT | Y OF PUTNAM |) ss.:) | |
| I, | (print name of c | | , being duly sworn upon his/her oath depose |
| | the following under | • | |
| 1. I | | | <u>e</u> of |
| | (c | ircle one) | (print name of company) |
| | | | kers' Compensation laws and regulations and ompliance throughout the length of licensing. |
| | | | (signature of deponent) |
| Subscribed | l and sworn to before me | e on | |
| this | _ day of | , 2019 | |
| | | | |
| | | | |
| | | | |
| N | NOTARY PUBLIC | | |

LICENSE AND PERMIT BOND

| That we, | (John Doe – dba, In | nc., LLC. etc) | , Of the |
|---|--|---------------------------|-----------------------|
| (Town/City – etc) of (Town/C Company) a Corporation duly I | ity Name), State of | , as Principal | and (Bond |
| Company) a Corporation duly I | icensed to do business in the | State of | , as |
| Surety, are held and firmly bou | nd unto the Putnam County | Department of Consum | er Affairs, State of |
| New York, Obligee, | • | | |
| (VALID ONLY WHE | N A COUNTY, CITY, TOWN OF | R VILLAGE IS NAMED AS | OBLIGEE) |
| in the Amount of Five-thousand | d and no/100 (\$5,000.00) Do | llars, | |
| | (NOT VALID FOR MORE THA | AN \$5,000.00) | |
| Lawful money of the United Sta | ates, to be paid to the said O | bligee, for which payme | nt well and truly to |
| be made, we bind ourselves an | The state of the s | | • |
| THE CONDITION OF TH | IS OBLIGATION IS SUCH, Tha | t whereas, the Principal | has been licensed as |
| a SECONDHAND DEALER OF PR | RECIOUS METALS AND GEMS | S by the Obligee. | |
| NOW THEREFORE, if th | e Principal shall faithfully pe | rform the duties and cor | nply with the laws |
| and ordinances (including all ar | mendments), pertaining to the | ne license or permit, the | n this obligation to |
| be void, otherwise to remain in | full force and effect for a pe | eriod commencing on the | e day |
| of, 20 | , and ending on the | day of | |
| 20 unless renewed by co | ntinuation certificate. ***M | IUST RUN FOR THE ENTI | RE YEAR TERM OF |
| LICENSING*** | | | |
| This bond may be term | ninated at any time by the Su | rety upon sending notice | e in writing to the |
| Obligee and to the Principal, In | care of the Obligee or at suc | ch other address as the S | urety deems |
| reasonable, and at the expirati | on of thirty-five (35) days fro | m the mailing of notice | or as soon thereafter |
| as permitted by applicable law, | , whichever is later, this bond | d shall terminate and the | Surety shall be |
| relieved from any subsequent a | acts or omissions of the Princ | cipal. | |
| Dated this | _ day of | , 20 | |
| | | | |
| | | | |
| | | | INT NAME |
| | | P | rincipal |
| | | | |
| | | SIC | SNATURE |
| | | · | rincipal |
| Countersigned | | | |
| - Courter or Bridge | | | |
| | | | |
| By AGENT SIGNAT | TURE | Ву | |
| Resident Agen | t | | esident |

QuickStart for Businesses

This QuickStart will help you meet local and state reporting guidelines in a secure manner with no additional costs.

LeadsOnline is the nation's largest and most trusted electronic reporting system, serving as an agent to thousands of law enforcement agencies and as a service provider to tens of thousands of reporting businesses.

Reporting businesses and law enforcement agencies benefit from **cost-savings**, **enhanced efficiency and effectiveness**, **better business processes**, **and safer communities**.

Electronic reporting via LeadsOnline eliminates hassle, costs, and security issues with submitting emails, paper logs, disks, or keeping a log/journal for law enforcement access. We're pleased to serve you and your community.

How to register

- 1. Go to www.leadsonline.com.
- 2. At the top of the page, click Register:



3. Then click I am a business:

I am a business

- 4. Fill out the required information and accept terms and conditions at the end of the form.
- 5. Click **Submit Registration**.
- An email confirmation will be sent to the email you supplied. We'll then verify the
 information you submitted and will call you to show you how to use the system. If you
 need immediate assistance, call us at 800-311-2656.

If you don't have POS software

- 1. Go to www.leadsonline.com and login using your username and password.
- 2. In the menu, click on Ticket Assistant.
- 3. Enter the transaction information, customer information, and item(s) information into the appropriate fields all fields with an asterisk (*) are required.

4. Click on **Submit** after completing each ticket. The system will send the data to LeadsOnline. It's that easy.

If you're using POS software

- 1. Create a file or "police report" in your point-of-sale software.
- 2. Save the file; choose a location you can easily find (CD, USB drive, your desktop, etc).
- 3. Go to www.leadsonline.com and login using your username and password.
- 4. You'll land on the "Upload Data" screen; select your business from the drop-down list.
- 5. Click on the Browse button and select the file/police report you created; click Upload.

You'll receive an on-screen confirmation that the file was sent.



Check for errors and alerts by clicking **Store Monitor** under **My Account**. Email us at storesupport@leadsonline.com or call (800) 311-2656 for additional assistance.

You can view our terms of use and FAQs at www.leadsonline.com.

Top Questions Asked By Businesses

1. How much is this going to cost my business?

Nothing. Services provided to businesses by LeadsOnline are free of charge. All you need is a computer and Internet connection. (Law Enforcement pays an annual subscription to use the service.)

2. How secure is the LeadsOnline system?

The information you send is encrypted and our data center has passed the SAS 70 Type II security audit.

3. What if I don't have the Internet on the same computer as my business software?

Simply save your daily transactions to a CD or USB drive. Then put the CD or USB drive in the computer with Internet access and send your file. Uploading takes only 30 seconds, on average.

4. What if I don't have business software and still do transactions by hand?

If you write transactions by hand, LeadsOnline provides a user-friendly feature called Ticket Assistant to help you easily and rapidly input your daily transactions. As with all our services to businesses, Ticket Assistant is free of charge to you.

5. I have OLD software – will LeadsOnline still work for me?

Yes, as long as you can save a file of your transactions from your software. We can accept any file type except PDF or Word documents. You'll be surprised just how flexible our Client Support Team is in working with older software.

6. Who sees my data? Can other stores (my competitors) see it?

Only authorized law enforcement officials investigating crimes have access to the data on the LeadsOnline system. This means that no one else can see your company information. And you can't see anyone else's data, either. You can only see the transactions you have sent us, and you can do so via your Store Monitor screen.

7. How often should I send my transactions to LeadsOnline?

Reporting requirements vary by state and jurisdiction; however, law enforcement prefers businesses to upload at least once a day. And if it's done as part of opening or closing procedures, it's easier to remember, and it takes only 30 seconds.

8. I'm not computer literate. Is this going to be hard for me?

Many of our clients – both businesses and law enforcement – are not technically savvy, but that's why we offer free customer support. And we'll never charge you, no matter how many times you call. We work very hard to make sure this is easy for you.

9. Do I need to install software on my computer to use LeadsOnline?

No – LeadsOnline is 100% browser-based, meaning it's accessible only via the Internet. There is no need for software of any kind to be placed on your computer unless you choose to use LeadsOnline Image Capture to upload images. For more information about LeadsOnline Image Capture, contact our Client Support Team at (800) 311-2656.

10. If I upload to LeadsOnline, do I still need to do what I've always done in reporting to my local law enforcement agency?

It depends upon the circumstance, but generally no. LeadsOnline investigators access the information as needed during investigations, and will follow up with you if additional information is needed. If you are still unclear about the requirements put forth by your local law enforcement agency, then please contact the department directly.

11. Will my customers be aware that I am uploading?

No – the system does nothing to alert your customers to the manner in which you meet local reporting requirements. Your transactions are uploaded when you send them to us, in batch, each day.