Clist# 1440 Bushest 1 111

Department of Agriculture, Trade and Consumer Protection CP-121 (TRAC-433), 4/08 State of Wisconsin (WI Stat. 134.71)

Bu# 2574 47671

LICENSE APPLICATION

For

PAWNBOKER
SECONDHAND JEWELRY DEALER
SECONDHAND ARTICLE DEALER
SECONDHAND ARTICLE DEALER MALL/FLEA MARKET

Record Check Fee \$15 each person
Date:
FEIN# (51.2) 1/1/277 - 17
FEIN# 82-164 3537
Sellers Permit #
456-1029475469,02

	CHECK ALL THAT APPLY:						
	☐ Renew	val					
TYPE:	☐ Pawnbroker \$500.00 ☐ Secondhand Article Dealer \$500.00	☑ Secondhand Jewelry Dealer \$500.00 ☐ Mall/Flea Market \$1,000.00					

INSTRUCTIONS:

INDIVIDUAL LICENSE – Complete Sections 1, 2, 3 and 6
PARTNERSHIP LICENSE – Complete Sections 1, 2, 3, 4 and 6
CORPORATE LICENSE – Complete Sections 1, 2, 3, 5, and 6

JOEL@VON HASLE,

(SECTION 1) APPLICANT INFORMATION								
Applicant Name (Last, First, MI) Sex Race Date of Birth Place of Birth (City & State								
HASSIFB. JOEL.	m	m	C	Bate pr Bytti	Racine WI			
Street Address	City		State	ZIP	Home Telephone Number			
5732 66th St	Kenosha		WI	53142	262-498-0074			

	(SECTION 2) CONVICTION RECO	PRD						
Have you, or any other person listed on this application, been convicted of any of the following:								
A FELONY WI	☐ YES	⊅ NO						
WITHIN THE L	AST TEN (10) YEARS OF:							
	a misdemeanor? a statutory violation punishable by forfeiture? a county or municipal ordinance violation?	□ YES □ YES □ YES	MO MA NO MO MO MO					
For each "YES" respon	se provide the date of arrest, the nature of the offe	ense and conviction in	formation:					
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(SECTION 3) BUSINESS INFORMATION								
Business Name	Street Address	City	State	ZIP	Telephone Number			
Von Hasle Jewders	245 Main St #101	Racine	い1	53403	262-456-704			
Owner's Name	Street Address	City	State	ZIP	Telephone Number			
JOEL Hassle	5732 66th St	Kenosha	WI	53142	262-499-007			
Business Manager's Name	Street Address	City	State	ZIP	Telephone Number			

Building Owner's Name Johnson ledekenting	Street Address 1525 Howe St #47	City	State WI	ZIP	Telephone Number
- of in but of the provider	190 - 170MC 9 - W- 1				(Over)

								(Over
	(SECTI	ON 4)	PARTN	ERSHIP INF	ORMATION			
Partnership Name:								
List name, address, sex, race and date o							Laut	Laun
Name (Last, First, MI)	Sex	Race	DOB	Street Addr	ess	City	State	ZIP
			-					
							>	
			-			_	-	
	/CECT	ION E	CORR	DDATE INE	ORMATION			
Corporation Name:	(SEC)	ION 5	CORP	JKATE INF	ORWATION		State of	
. 1							Incorporat	
VONHASCE LLC							WI.	
List name, address, sex, race and date o	f birth (DC Sex	B) of all	DOB	Street Addr		City	If necessar	ry. Zip
Name (Last, First, MI)			+202-	10	661 St		w1	
HASSLER, JOEL, M	m	C	 	5732	00.21	Kenooha	WI	53142
							-	
		SECTI	ON 6) P	ENALTY NO	OTICE			
I understand that this license ma	y be der	nied or	revoked	I for fraud, m	nisrepresentat	ion or false sta	itement o	contained
in the application or for any viola	LION OF W	/18. Sta	115. 99	34.7 1, 343.0)4, 340.02 OF	740.03.		
Under penalty of law, I swear tha	it the infe	ormatio	on provid	ded in this a	pplication is tr	ue and correct	to the be	est of my
knowledge. I agree to inform the application.	e clerk w	ithin te	n (10) a	ays of any c	nange in the i	niormation suf	ppilea in	นาเธ
аррисацоп.	//							
Signature of Applicant:	4							
-								
Print Name of Applicant:	EL A	<u> </u>	ER				57	
		7 33 .						
FOR ADMINISTRATIVE USE O	NLY							
FEES RECEIVED: Record C	Check @	\$15 ea.	. person S	Se	econdhand Artic	ele License \$		
								¢
Pawnbro	ker Licen	ise \$_		56	econonano Dea	ler Mall/Flea Ma	irket Licei	ise o
Secondh	and love	almi Lici	ance ¢	T	OTAL FFF. ¢	Rcr	nt #·	
Secondn	anu sewe	any Lice	ыо⊏ Ф_	'`			es II s	
☐ Fingerprints ☐ Record ch	heck							

Date License Issued:

License # Issued:



WISCONSIN DEPARTMENT OF REVENUE PO BOX 8902 MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902 MADISON, WI 53708-8902 ph: 608-266-2776 fax: 608-224-5761 email: DORBusinessTax@wisconsin.gov

website: revenue.wi.gov

Letter ID

L0598869456

VONHASLE LLC 245 MAIN ST STE 101 RACINE WI 53403-1034

Wisconsin Department of Revenue Seller's Permit

Legal/real name:

VONHASLE LLC

Business name:

VON HASLE JEWELERS

245 MAIN ST SUITE 101

RACINE WI 53403-1034

- This certificate confirms you are registered with the Wisconsin Department of Revenue and authorized in the business of selling tangible personal property and taxable services.
- You may not transfer this permit.
- This permit must be displayed at the place of business and is not valid at any other location.
- If your business is not operated from a fixed location, you must carry or display this permit at all events.

Tax TypeAccount TypeAccount NumberSales & Use TaxSeller's Permit456-1029475468-02