Forms are to be delivered or faxed daily to the:
Schenectady Police Department
Fax #: 374-3401

SCHENECTADY POLICE DEPARTMENT
Second Hand Dealer
Record of Purchase Log

Print Clearly!

Customer Name →	Last Name First Name Middle Initial	**Identification Provided** ☐ New York State Drivers License ☐ New York State Identification Card ☐ Other: (specify)
Current Address →	Address Apt	
City, & State →	City State Zip Code	**Identification Number**
Phone →	Area Code Telephone #	Race / Sex / Hgt. / Wgt. / Hair / Date of Birth

Quantity	Name of Property – Full Description (Brand, Model, Size, Color, Stones, Setting, etc.)	Serial Number (Note if number has been defaced)	In Original Manufacturers Packaging	Amount paid to Customer
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	

Customer Signature:	Dealer Signature:	Date:

WARNING: USE OF A FALSE NAME OR IDENTIFICATION TO SELL STOLEN PROPERTY CONSTITUTES A FELONY AND VIOLATORS WILL BE PROSECUTED.