

Assignment and Report

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) County Line Pawn, LLC County Line Pawn 3585 Hwy 367 South Cabot, AR 72023, Lonoke	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 777060-2016-0084-B1B		
	3. PERMIT/LICENSE NUMBER 571085025C02282	4a. TARGET DATE 6/30/2016	4b. TARGET HOURS 40
	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)		

6. ATF OFFICER(S) ASSIGNED
(b) (6) - Lead Investigator

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)
(b) (6) Area Supervisor, 10/27/2015

8. PURPOSE/SPECIAL INSTRUCTIONS
Inspection in FY14 resulted in a WC on 10/2/14. Conduct a full recall inspection.

9. INSPECTION RESULTS		<input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC		10. TRAVEL EXPENSES (OPTIONAL)	
NO. OF VIOLATIONS	3	NO. OF REFERRALS		2111 - PER DIEM	
NO. OF TECS CHECKS	16	NO. OF TECS HITS		2112 - P.O.A.	
NO. OF TAX ADJUSTMENTS		\$ VALUE OF TAX INCREASES		2113 - COMM. AIR	
		\$ VALUE OF TAX DECREASES		2114 - RENTAL CAR	
NO. OF ASSESSMENTS		\$ VALUE OF ASSESSMENTS		2115 - GPV EXPENSES	
NO. OF CLAIMS		\$ VALUE OF CLAIMS		2116 - MISC.	
NO. OF TAX PERIODS		\$ VALUE OF TAXES VERIFIED		TOTAL \$ FOR INSP.	

11. ATF OFFICER'S RECOMMENDATION
Submitted by (b) (6) - Industry Operations Investigator
Submitted on: 01/11/2016

Violts WL ONLY and No Recall Inspection

12. TIME ACCOUNTING DATA	
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b) (6)
NOV 2015	18.00
DEC 2015	12.50
JAN 2016	11.00
ATF OFFICER'S SUBTOTAL	41.50
ATF OFFICER'S SIGNATURE	
TOTAL HOURS	41.50

13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION
Inspection concluded on 12/1/15 disclosing three violations. A Warning Letter was mailed on 2/8/16. No recall is necessary.

Update the following RP information in FLS for (b) (6)
a. home address (b) (6) and
b. home phone (b) (6)

Violts WL ONLY and No Recall Inspection

<input checked="" type="checkbox"/> REVIEWED	<input checked="" type="checkbox"/> CONCUR	<input checked="" type="checkbox"/> SEE COMMENTS	<input checked="" type="checkbox"/> FINAL DISPOSITION
SIGNATURE AND TITLE (b) (6) - Area Supervisor	(b) (6)	Field Division (b) (6) email (b) (6)@atf.gov, c:US Date: 2016/02/02 13:50:47 -0600	REVIEW DATE 02/02/2016

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13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION

See PII dated 2/8/16 MDWREN

Viols WL ONLY and No Recall Inspection

☒ REVIEWED

☒ CONCUR

☒ SEE COMMENTS

☐ FINAL DISPOSITION

SIGNATURE AND TITLE

MDWREN - DIO

REVIEW DATE

02/08/2016

ROUTING SEQUENCE AND DATE

- ☐ 1. _____
- ☐ 2. _____
- ☐ 3. _____
- ☐ 4. _____

CONTROL FILE POSTED DATE _____

Report of Violations

Instructions

Please write firmly with a ball point pen when completing this form. ATF officers will prepare this form in triplicate. The original copy will be given to the proprietor or a responsible representative. The remaining copies will be submitted with the completed inspection report. Supervisors will detach one copy from the completed report for their files.

Name of Proprietor County Line Pawn, LLC County Line Pawn	Street Address 3585 Hwy 367 South	City Cabot	State AR	Zip Code 72023-	County Lonoke	Page 1 of 2 Pages
License/Permit/Registry Number (If any) 571085025C02282	Expiration Date 3/1/2018	Date(s) or Period of Inspection 11/05/2014 through 11/04/2015				

Inspection Results

An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number: 1

Nature of Violation:

Failure to maintain an accurate and/or timely Acquisition & Disposition (A&D) record.

1. [REDACTED] occasions, serial numbers were incorrectly listed in the A&D.

Citation: 27 CFR 478.125(e)

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

The Acquisition & Disposition (A&D) record shall be maintained accurately and all entries timely-made. The manufacturer, model, serial number, caliber/gauge, type of firearm, date of acquisition, from whom acquired, date of disposition, and to whom disposed shall be accurate and complete.

Number: 2

Nature of Violation:

Failure to obtain and maintain a complete and accurate ATF Form 4473.

1. [REDACTED] occasions, the middle name of the transferee was represented by an initial only.
2. [REDACTED] occasions, the county of residence was incorrect or blank.
3. [REDACTED] occasion, the residential address of the transferee was listed as a P.O. Box.
4. [REDACTED] occasion, the State of Residence (#13) was incorrect.

Citation: 27 CFR 478.124(c)(1)

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

The ATF Form 4473 must be accurate and complete. Section A (and Section C if necessary) must be fully completed accurately by the transferee (customer). Sections B and D must be fully completed accurately by the transferor (licensee or clerk).

Report of Violations

Instructions

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Name of Proprietor County Line Pawn, LLC County Line Pawn	Street Address 3585 Hwy 367 South	City Cabot	State AR	Zip Code 72023-	County Lonoke	Page 2 of 2 Pages
License/Permit/Registry Number (If any) 571085025C02282	Expiration Date 3/1/2018	Date(s) or Period of Inspection 11/05/2014 through 11/04/2015				

Inspection Results

An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number: 3

Nature of Violation:

Failure to report the sale of multiple handguns as required.

On [REDACTED] occasion, a multiple sale of handguns was not reported to ATF and the Arkansas State Police as required.

Citation: 27 CFR 478.126a

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

The sale or other disposition of two or more handguns to the same non-license individual at the same time or within five business days must be reported to ATF and the Arkansas State Police via ATF Form 3310.4.

I Have Received a Copy of This Report of Violations (Proprietor's signature and title)

Owner

Date 12-10-15

(b) (6)

Investigator

Date 12-10-15



U.S. Department of Justice

Bureau of Alcohol, Tobacco,
Firearms and Explosives
425 West Capitol Avenue, Suite 775
Little Rock, Arkansas 72201

www.atf.gov

February 8, 2016

777060 (b) (6)
5300

CERTIFIED MAIL

Ms. Angela Kennedy
President
County Line Pawn, LLC
3585 Highway 367 South
Cabot, Arkansas 72023

Federal Firearms License 5-71-085-02-8C-02282

Dear Ms. Kennedy:

During a recent compliance inspection at your firearms business covering the period of November 5, 2014, until November 4, 2015, you were cited for violations of 27 Code of Federal Regulations, Part 478. A copy of the Report of Violations, Form 5030.5, issued at the time of the inspection is enclosed.

All violations were fully explained to you by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) investigator. You indicated that you understood the requirements of the firearms laws and regulations. You further indicated that corrective actions would be taken to eliminate future violations.

The records you are required to maintain and the business operations you conduct are important to law enforcement in our continuing effort to reduce violent crime and protect the public. It is essential that you comply with all Federal laws and regulations that govern your firearms business. This is critical to carrying out our mission to protect the public and ensure that criminals do not gain access to firearms. ATF appreciates the efforts you and other industry members make in this area, and we look forward to continuing to work with you in that regard.

You are reminded that retention of your Federal Firearms License is conditioned upon your compliance with Federal laws and regulations. Any future violations, either repeat or otherwise, could be viewed as willful and may result in the revocation of your license. Please ensure that future compliance is achieved.

County Line Pawn, LLC

Should you have any questions regarding this matter, please contact Investigator (b) (6) at (b) (6)

Sincerely yours,

(b) (6)

Area Supervisor

Enclosure

cc: Federal Firearms Licensing Center
Little Rock II Field Office