

Fee: \$100.00 Application  
\$15.00 Record Check per Person

License Expires June 30, 20\_\_

**APPLICATION FOR GASOLINE STATION - CITY OF RACINE, WI**

FEIN#: \_\_\_\_\_

Wisconsin Seller Permit #: \_\_\_\_\_

NAME OF PERSON IN CHARGE: \_\_\_\_\_

TRADE NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS OF BUSINESS: \_\_\_\_\_

Owner is (Please specify):

\_\_\_\_\_ CORPORATION OR LLC \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ INDIVIDUAL \_\_\_\_\_ OTHER \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Owner Date of Birth: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

hereby applies for a Gas Station License to conduct and maintain a gasoline service station at:

\_\_\_\_\_, until **June 30, 20\_\_**.

**INDIVIDUAL OR PARTNERSHIP**

Person's Name	Address & Home Phone Number	Date of Birth

**CORPORATION (NAME)**

Title	Name	Address	Date of Birth
President			
Vice-President			
Secretary			
Treasurer			

1. The applicant is the owner/manager of said proposed business, which contains \_\_\_\_\_ tanks with the following capacities:

\_\_\_\_\_.

2.\* Attach sketch showing the location of the premises and structures, pumps, pipes, hoses, conductors and drain pits; the location and use of all buildings on adjoining property; the location of all sidewalks abutting on the gasoline service station premises; and the dimensions of the said premises.

3. List in chronological order employers during the preceding ten years (use opposite side of paper if necessary):

<u>Employer's Name and Address</u>	<u>Nature of Business</u>	<u>From</u>	<u>Employed</u>	<u>To</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. Have you ever been convicted of or have penalties or forfeitures assessed against you for violation of laws or ordinances governing the operation of gasoline service stations, the sale or traffic in gasoline, naphtha, benzole, lubricating oil or other flammable liquids having a flashpoint below 165 degrees Fahrenheit, or fraudulent practices of any nature?

(If yes, state exact nature of conviction, penalty, or forfeiture and if applicable, trial court, trial date, and penalty imposed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned agrees that the license, if granted, will not be transferred to any other person or persons and Will conform to and abide by all the Ordinances of the City of Racine relating to gasoline service stations.

\_\_\_\_\_  
Business Phone No.

\_\_\_\_\_  
Signature of Owner  
Title: \_\_\_\_\_

\_\_\_\_\_  
Home Phone No.

\_\_\_\_\_  
Signature of Agent  
Title: \_\_\_\_\_

**\*SKETCH NOT REQUIRED ON RENEWALS UNLESS CHANGES HAVE BEEN MADE\***