

Fee: \$30.00 each Vehicle
\$15.00 Record Check per person

License Expires November 1, 20__

Application for Junk Collector License – City of Racine

FEIN#: _____

Wisconsin Seller Permit #: _____

NAME OF PERSON IN CHARGE: _____

TRADE NAME: _____ PHONE: _____

ADDRESS OF BUSINESS: _____

The undersigned hereby applies for a license to engage in the business as a Junk Dealer and for that purpose represents the following information to be true:

Name _____

Business Address _____ Zip Code _____

Business Telephone No. _____

Home Address _____ Zip Code _____

Home Phone No. _____

Description of Premise: _____

No. of Vehicles _____ Plate No. _____

Year of Truck	Make of Truck	State License No.

Signature of Applicant

Date

*Copy of the Title (that lists the applicant as the owner.)
*Copy of the Insurance Certificate (that complies with Ord. 22-661).
(\$150,000/300,000 and personal injury \$50,000 & the certificate must show applicant's name and have the City of Racine as the Certificate Holder).