

Fee: \$150.00 Application  
\$15.00 Record Check per person

License Expires November 1, 20\_\_\_\_

### Application for Junk Dealer's License – City of Racine

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

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

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

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

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

#### 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			

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:

Description of Premise: \_\_\_\_\_

\_\_\_\_\_  
Signature

\*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).