## SALVAGE/JUNK YARD APPLICATION FOR LICENSE

**CODIFIED ORDINANCE No. 723** 



## PLEASE PRINT Permit No. \_\_\_\_\_

Applicant's Name		Soc. Sec. #		Date of Application
Applicant's Current Address		City, State, Zip		
How Long @ Address?	Phone #		Alternate Phone #	
Previous Address			How Long?	
Location of Junk Yard			Business Phone #	
Business Name				
Describe the Nature of the Business				
Indicate whether applicant is party to a firm, partnership or association				
List names, addresses, and Social Security Numbers for each member				
1.				
2.				
3.				
4.				
5.				
If Corporation, list date and place of incorporation				
By signing below, I certify that the above information and the contents therein are true to the best of my knowledge. I agree to abide by all the terms, contents, and conditions of the Ordinances of the City of Trotwood including, but not limited to, Chapter 723.				
Applicant's Signature				ate
	FOR CITY OF TRO	rwood	USE ONLY	
\$50.00 Fee Paid?	Yes	Paid By:	Check No.	Cash
	□ No			
\$10.00 Renewal Fee Paid?	Yes	Paid By:	☐ Check No.	Cash
	□ No			
Approved By: Quincy E. Pope, Sr., Public Safety Director/Deputy City Manager			Da	ate

App. No. 006 Rev. 8/21/15