

AUCTION PERMIT APPLICATION

To: City Clerk
City of Fond du Lac

FEE: \$100 a day

The following firm respectfully applies for an Auction Permit under and pursuant to s.12.15, Fond du Lac Municipal Code of Ordinances.

SALE INFORMATION:

Date (s) _____ Hours: _____ a.m. to: _____ p.m.
(No sale can be conducted prior to 8:00 a.m. or after 6:00 p.m.)

Address of Sale: _____

Auctioneer: Name _____
Business Address: _____

City Address (If sale is more than 1 day) _____

Phone Numbers: Business: () _____

Local Residence: () _____

BUSINESS INFORMATION:

Firm: _____ Phone Number: _____

Address: _____

Wisconsin Seller's Permit Number: _____

Federal Employer Identification Number: _____

Firm is Sole Proprietorship Partnership Corporation

(If Corporation: Date of Incorporation _____

Registered Agent _____

City & State of Incorporation _____

Name of Corporation _____

Complete for all sale proprietors, partners and corporate directors as applicable

Name	S.S.No.	Date of Birth	Position	Home Address

Read carefully before signing: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; designated corporate officers must sign.)

It is further acknowledged that a copy of the municipal code governing auctions has been received by the permittee; that the daily permit fee of \$100 per day must accompany this application.

SUBSCRIBED AND SWORN TO BEFORE ME

This _____ day of _____, 2_____

(Clerk/Notary Public)

My Commission Expires _____

(Pres. of Corp./Partner/Individual)

(Secretary of Corp./Partner)

(Additional Partner(s) if any)

TO BE COMPLETED BY CLERK:

Date received and filed with municipal clerk _____

Date Reported to council/board _____

Date License granted _____

License Number issued _____

Date License issued _____

(Signature of Clerk/Deputy Clerk)