



CITY OF WYANDOTTE, MICHIGAN

3200 BIDDLE AVENUE 48192 • CLERK'S OFFICE: (734) 324-4560 • CLERK'S FAX: (734) 324-4568

APPLICATION FOR LICENSE TO OPERATE

Birth date

Date Date of Issue Birth place

Fee Type of License Citizen B N No

Ht.....Wt.....Eyes.....Hair.....

New License Renewal Dupl..... License No License Expires 1st Monday, June

Name of Licensee Home Address Telephone

Name of Person in Active Charge Home Address Telephone

Name of Firm Address Telephone

Name of Partner Home Address Telephone

Product Produced or Mfg. by: Address

Number of Devices to be Licensed: JUKE BOX KIDDIE RIDE OTHER

Note: Licensee shall submit, in duplicate, at the time of application for license, a complete list of devices to include:
Trade Name; Type, Serial Number and Location.

Police Record Check: Yes..... No..... Date.....

Have you ever been convicted of a Felony? Misdemeanor? (List on Back)

LICENSE APPLICATION TO BE INSPECTED BY:

Department	Approved	Disapproved (see over)	Signature and Date	Reason for Disapproval (stated reverse side)
..... Treasurer
..... Health
..... Engineering
..... Fire
..... Police
..... Council

I (we) hereby agree to permit the Health Officer and/or his representative to inspect the above establishment and everything in connection with it. I further agree to conform to the Charter and Code of Ordinances of the City of Wyandotte governing this establishment.

.....
Signature of Applicant

The City Council at its meeting of Approved..... Disapproved.....

This license to be issued to
(Name of licensee)