



CITY OF CLAWSON
USED CAR DEALER LICENSE APPLICATION

I/We hereby apply for a: Renewal New Fee: \$50.00

I/We hereby make application for a Used Car Dealer License, and in accordance with said ordinance submit the following information and facts:

Kind of Business: _____

Name of Business: _____

Location or Address: _____

Driver's License #: _____

Name of Owner: _____ Phone #: _____
(If Firm or Corporation, Give Names of Officers)

Address of Owner (or Officers):

Applicant: _____ Date: _____
(Signature)

City Inspector's Report:

The following repairs, alterations, or corrections must be made before building can be used for business or license issued:

Inspector: _____ Date: _____

| OFFICE USE ONLY | | | |
|--------------------|-----------|--------------------|--------------|
| | Signature | Approved | Not Approved |
| Building Inspector | | | |
| Chief of Police | | | |
| License No. _____ | | Date Issued: _____ | |