



APPLICATION FOR AUCTIONEERS LICENSE

Pursuant to Chapter 806 Battle Creek, MI Code of Ordinances

Business Information

Business Name _____
 Address _____ City _____ State _____ Zip _____
 Phone Number _____ E-mail _____

Owner Information

Name _____
First Middle Last
 Address _____ City _____ State _____ Zip _____
 Contact Number _____ Date of Birth _____

References – Please list three (3) residents of the City of Battle Creek to certify good reputation and moral character of applicant:

_____	_____	_____
<small>Name</small>	<small>Address</small>	<small>Phone Number</small>
_____	_____	_____
<small>Name</small>	<small>Address</small>	<small>Phone Number</small>
_____	_____	_____
<small>Name</small>	<small>Address</small>	<small>Phone Number</small>

I agree to operate the aforementioned business in compliance with the guidelines established pursuant to Chapter 806 of the Codified Ordinances of Battle Creek, Michigan. In addition, I agree to cooperate with the investigator/inspector assigned to screening this application.

 Signature of Owner Date

Please submit the completed application with required fees and insurance documents to:
 City of Battle Creek Clerk’s Office - 10 North Division Street, Room #111, Battle Creek, MI 49014

INSURANCE REQUIREMENTS: License and Permit Bond in the amount of \$2,000

NON-REFUNDABLE FEE: \$15.00 per day or \$50.00 per year

Please allow 5-10 business days for processing.

FOR OFFICE USE ONLY

Please conduct your inspection and forward your recommendations to the Clerk’s Office

Risk Management Approved Denied Signature: _____

Comments: _____
