



Date Submitted: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

## INITIAL MERCHANTS APPLICATION

Application Fee: \$100

Transfer Fee: \$100

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**Merchant** – Any person who engages in or conducts a business of selling goods, wares and merchandise and who for the purpose of carrying on such business uses, leases or occupies either in whole or in part, a room, building, structure, or vacant property for the exhibition and sale of such goods, wares, and merchandise.

Every merchant, before opening and/or operating a mercantile establishment in the city or before advertising or exposing his goods, wares or merchandise for sale, shall procure from the city clerk an initial merchants license.

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Date of Application: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

\*Business (name & address) previously at this address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Applicant / Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Email: \_\_\_\_\_

If applicable: In the past 18 months, I have been engaged in business at:

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Length of time at this location: \_\_\_\_\_ Date discontinued: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Applicant: \_\_\_\_\_

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If transfer of ownership:

Name of Business: \_\_\_\_\_

Name of Previous Owner: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Transfer: \_\_\_\_\_

Email: \_\_\_\_\_

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I hereby certify that the foregoing statements are true and accurate to the best of my knowledge and belief and that I have read the city's initial merchants license ordinance and agree to abide by its terms.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR CITY USE ONLY**

**Approval by Building Official:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approval by City Clerk:** \_\_\_\_\_ **Date:** \_\_\_\_\_