NOVI CITY CLERK'S OFFICE
45175 W. TEN MILE ROAD
NOVI, MI 48375
(248) 347-0456
Fax (248) 347-0577

AUCTIONEER LICENSE APPLICATION
Chapter 6

State the full names, business addresses and residence addresses of the owners, proprietors, officers, managers and local addresses of all owners, proprietors, officers, and managers of the applicant's business; the names and addresses of each officer if the applicant is a corporation; the names and addresses of all partners if a partnership:

_____

_____

_____

_____

_____

Phone number: _____

Date(s) of Auction: _____

State place or places in the city where the applicant proposes to conduct an auction.

_____

_____

State the nature, kind and character of the goods, wares, merchandise or services to be offered for sale by the applicant.

_____

_____

List all assumed, trade or firm names under which the applicant intends to do business.

_____

_____

_____

State whether or not the applicant or person conducting or managing the applicant's business has been convicted of a crime, misdemeanor or the violation of any municipal ordinance, and, if so, full particulars in connection therewith.

_____

_____

State if the business or operation thereof, or use of business facilities requires state or county license, proof that such license has been obtained and the expiration date.

_____

_____

_____

☐ **License fee is $100 per year pro-rated to $50 is purchased <u>after July 1st</u>.**

☐ **Attach a copy of the front and back of the applicant's current driver's license.**

☐ **Attach a copy of the site plan or drawing to show where the auction will take place.**

_____
Signature of applicant

_____
Title

Subscribed and sworn before me, this _____ day of _____, 20___

_____
Notary public

_____ County, Michigan

My commission expires: _____

For office use only

Date paid: _____ Receipt number: _____

Driver's license: _____ Site Plan/Drawing: _____