



JUNK DEALERS/ SECOND-HAND DEALERS/ SCRAP PROCESSOR LICENSE APPLICATION

Print Name or Trade Name _____

Business Address _____

Business Phone _____ Street _____ City _____ State _____ Zip Code _____
Home Phone _____

Cell Phone _____ E-mail address _____

Is applicant the owner of the property? Yes _____ No _____

If no, what is the affiliation? _____

Property owner's name _____

Property owner's Address _____ Phone Number _____

Indicate whether owned by a Corporation (), Partnership (), Individual (). If owned by a corporation, all officers' name, address, and social security numbers are to be listed. If a partnership, give name, address, social security number and date of birth of each partner.

Name _____ Address _____

S.S. # _____ D.O.B. _____ Title _____

Name _____ Address _____

S.S. # _____ D.O.B. _____ Title _____

Neither the undersigned nor any other person listed above has been arrested for/or convicted of any felony or misdemeanor except as follows. List all arrests or convictions, except for traffic violations. Use reverse side if necessary.

Date _____ Charge _____ Location (City & State) _____

Date _____ Charge _____ Location (City & State) _____

Date _____ Charge _____ Location (City & State) _____

Check one: () Junk Yard () Scrap Metal Processing Facility () Scrap Metal Processor
() Second-Hand Dealer () Second-Hand Store () Push Cart

Is business enclosed with solid built nontransparent fence at least (6") feet high? Yes _____ No _____

How many years has business been at present location? _____

I hereby certify that all statements contained in this application are true. I agree, if licensed to me, to fully comply with all provisions of the Cincinnati Municipal Code Chapter 843.

Signature of Applicant _____

Date _____

FOR CITY OF CINCINNATI USE ONLY

Treasury: Approved ___ Disapproved ___ Building&Inspections: Approved ___ Disapproved ___ Inspector _____

Health: Approved ___ Disapproved ___ Engineering: Approved ___ Disapproved ___ Inspector _____

Zoning: Approved ___ Disapproved ___ Plot Plan: Approved ___ Disapproved ___

License No. _____ Date Issued _____ Date Received _____ Expiration Date _____

License Fee _____ A Renewal License carries a 5% penalty, per month, if not renewed within 15 days of expiration.