

Date _____

License Number _____

**CITY OF STERLING HEIGHTS
OFFICE OF THE CITY CLERK**

**APPLICATION FOR RENEWAL OF LICENSE TO
OPERATE A JUNK YARD OR AUTOMOBILE WRECKING YARD**

BUSINESS NAME _____

BUSINESS ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUSINESS TELEPHONE NUMBER _____

OWNER'S NAME _____

OWNER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

OWNER'S TELEPHONE NO _____ DRIVER'S LICENSE NO. _____

OPERATOR'S NAME _____

OPERATOR'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

OPERATOR'S TELEPHONE NO _____ DRIVER'S LICENSE NO. _____

I, _____, certify that all statements and information on this application for renewal of license to operate a junkyard or automobile wrecking yard are true. I understand that any false information or statements in this application may result in the revoking of my license by the City of Sterling Heights.

Applicant's Signature

State of Michigan)
County of Macomb)

On this _____ day of _____, 20____, before me personally appeared _____, who, being duly sworn, says that he signed the above application and that the statements therein are true.

Notary Public

Application for Renewal of Junk Yard or Automobile Wrecking Yard
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(OFFICE USE ONLY)

_____ Copy of Chapter 26 of Code Ordinances

_____ \$305.00 license fee

_____ Police Department approval date: _____

_____ Fire Department approval date: _____

_____ Building Department approval date: _____

_____ Code Enforcement approval date: _____

_____ Treasury Department approval date: _____

_____ City Council approval date: _____

Issued by: _____

Approved by: _____