



**LICENSE APPLICATION
SECOND HAND STORE**

APPLICANT

Name: _____

Address: _____

Phone: _____ Email Address _____

BUSINESS

TAX I.D. # _____

Name: _____

Address: _____

Phone: _____

DESCRIBE NATURE OF BUSINESS: *(ie clothing, antiques, etc)*

Date

Signature of Applicant

License expires April 30th, following the date of issuance.

FOR OFFICE USE ONLY

Fee: \$75.00, annually

\$1,000 Bond: Y / N Bond Expiration Date: _____