NEW_____ FEE_____

RENEWAL_____ RECEIPT #_____

JUNK COLLECTOR APPLICATION
YOU MAY NOT STORE ITEMS WITH THIS LICENSE

NAME_____

HOME ADDRESS _____PHONE_____

_____

DATE OF BIRTH_____ PLACE OF BIRTH_____

ARTICLES TO BE COLLECTED_____

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR_____

IF YES, EXPLAIN_____

_____
Signature of Applicant

_____
Date

Police Department Recommendation: Approved_____ Denied_____

_____
Chief of Police Date

Inspection Department Review:

_____
Name Date

COLLECTION HOURS ARE 7AM TO 10 PM