

LICENSE APPLICATION FOR TRANSIENT MERCHANTS

COUNTY OF IONIA
100 MAIN STREET
IONIA, MICHIGAN 48846

NANCY HICKEY
TREASURER

LICENSE APPLICATION FOR TRANSIENT MERCHANTS

PUBLIC ACT #51, 1925 AS AMENDED BY PUBLIC ACT #292, 1988

NAME OF FIRM: _____

HOME ADDRESS: _____

PHONE NUMBER(S): _____

FEDERAL TAX I.D. NUMBER: _____

1. OF EMPLOYEES: _____

STATE EMPLOYER I.D. NUMBER: _____

KIND OF BUSINESS: _____

STATE WHERE DO YOU INTEND TO DO BUSINESS IN IONIA COUNTY:

ADDRESS : _____

PHONE NUMBER: _____

*NAME OF REPRESENTATIVE : _____

ADDRESS : _____

PHONE NUMBER: _____

*If acting as Agent for another person, the Applicant shall cause to be file with the County Treasurer a POWER OF ATTORNEY, appointing the County Treasurer the Agent of Principal on whom service of process may be made in any suit commenced against the Principal.

DEPOSIT REQUIREMENTS

COPY OF MICHIGAN SALES TAX LICENSE

(Except for Applicant selling only food for human consumption)

SURETY BOND _____ EXP. _____
INSURANCE FIRM DATE
\$500.00 CASH MONEY ORDER CASHIER'S CK.

\$25.00 LICENSE FEE

EXPIRES DECEMBER 31, _____

NOTE: Surety Bond or cash deposit shall be returned to merchant four months after expiration of license subject to any claims or judgments that may be properly field within Ionia County as provided in §4, PA 51, 1925

DATE

APPLICANT'S SIGNATURE