

The undersigned hereby makes application for an Auctioneer's License under the Ordinances of the City of Ann Arbor, Chapter 78, subsections 7:51 through 7:55, for the purpose of obtaining said license and makes the following statements:

NAME & ADDRESS WHERE AUCTION IS TO BE HELD		
NAME & ADDRESS OF AUCTIONEER ESTABLISHMENT OR NAME & ADDRESS OF OWNER		
NAME & ADDRESS OF CONTACT PERSON		
DATE OF AUCTIO	N	SIGNATURE OF OWNER OR MANAGER
		DATE
A Surety Bond or Cashier's Check in the amount of \$300 is required. There is a \$40.00 per day fee for each day the auction is held. Make CHECKS PAYABLE TO: THE CITY OF ANN ARBOR. Any questions should be directed to the Ann Arbor City Clerk's Office at: 1-734-794-6140. You must call after the conclusion of your Auction and notify this office of the duration of your Auction and to request reimbursement of the balance of the unused portion of your bond.		
RETURN TO:	Ann Arbor City Clerk's Office 301 E. Huron St. P.O. Box 8647 Ann Arbor, MI 48107-8647	
OFFICE USE ONLY		
License Number:		Date Issued:
Paid:		Expires:
Police Dept. Representative:		
City Clerk Representative:		