



# City of Petoskey

101 East Lake Street, Petoskey, Michigan 49770 • 231 347-2500 • Fax 231 348-0350

## APPLICATION FOR LICENSE TO CONDUCT REMOVAL, CLOSING-OUT, FIRE, LIQUIDATION SALE (Act 39 Public Acts of 1961; Act 219 Public Acts of 1963)

An Act to regulate insurance, bankruptcy mortgage, insolvent, assignee's, executor's, administrator's receiver's, trustees' removal and closing out sales, and sales of goods wares and merchandise damaged by fire, smoke, water, or otherwise; to provide penalties for the violation hereof; and to repeal certain acts and parts of acts.

APPLICANT INFORMATION
Name of Applicant:
Street Address:
City, State, Zip Code:
Home Telephone Number:

BUSINESS INFORMATION
Business Name:
Street Address:
City, State, Zip Code:
Telephone Number:
Names and Addresses of Owners or Corporate Officers:
Is the applicant the owner of the goods to be sold?
How long has applicant been in business at this location?

SALE INFORMATION	
Name and style in which such sale is to be conducted:	
Address where the sale is to be conducted	
The date and period of time over which such sale is proposed to be conducted	
Name and address of person in charge of and responsible for the conduct of the sale	
Name:	Phone:
Address:	
Type of Sale	Reason for Sale
<b>Examples:</b> Closing Out Sale - Applicant to state that the business will be discontinued at the termination of the sale. Removal Sale - Applicant to state that the business will be discontinued at the termination of the sale, and location of premises to which the business is to be moved. Fire, Smoke, Water or Otherwise Sale, Goods Damaged - Applicant to state time, location and cause of damage)	
Has applicant ever received a license to conduct removal, closing out, fire or liquidation sale before? _____	
If so, when and where:	
Fee: \$50.00 for maximum 90-day period.	

AFFIDAVIT	
Applicant further represents that no goods will be added to the inventory after the application is made or during the sale and that the inventory contains no goods received on consignment.	
_____	_____
Date	Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
 Notary Public, Emmet County, Michigan  
 My Commission Expires: \_\_\_\_\_  
 Acting in \_\_\_\_\_ County.

CITY USE ONLY	
<input type="checkbox"/> Approved License No.: _____	<input type="checkbox"/> Denied
<input type="checkbox"/> \$50 Fee Paid Date: _____	

This license may be issued for up to 90 days for the sale of the inventoried goods at the premises specified in the application. MCL 442.216.