MERCHANDISE/SERVICE VENDING DISTRIBUTOR

BUSINESS LICENSE APPLICATION

OFFICE OF THE CITY CLERK
ONE CITY SQUARE, SUITE 205
WARREN, MI 48093-2393
(586) 574-4557 / FAX (586) 574-4556

FEES: **DISTRIBUTOR FEE: $50.00**
PER MACHINE: $5.00
LICENSE EXPIRES: AUGUST 31 ANNUALLY
10% late fee for renewal applications received after this date

I hereby apply for a license to distribute coin-operated vending machines and vending equipment within the City of Warren in compliance with the Code of Ordinances of the City of Warren. (Chapter 40, Article I, Section 40-1 thru 40-10, Article II, Section 40-26 thru 40-34, Chapter 18)

NEW ☐ RENEWAL ☐ **PLEASE COMPLETE APPLICATION IN FULL**

COMPANY NAME: PHONE:

BUSINESS ADDRESS:
street city state zip

OWNER NAME: PHONE:

HOME ADDRESS:
street city state zip

DATE OF BIRTH: / /

EMAIL ADDRESS:

APPLICANT NAME: PHONE:

APPLICANT ADDRESS:
street city state zip

SEND CORRESPONDENCE BY: ☐ **EMAIL:** ☐ **MAIL ONLY**

I certify that all statements on this application are true. I understand that any false information may result in the revoking of this license.

Signature:

Print Name:

Preferred Mailing Address: ☐ Business Address ☐ Owner Address ☐ ATTN:

☐ Other:
street city state zip

REQUIREMENTS:

- ☐ **Copy of Driver's License or State ID**
- ☐ **Completed attached list of locations & machines**

*** In accordance with the Warren Code of Ordinances mandated in Section 18-9: No license shall be issued or renewed under the provisions of this chapter or any other ordinance of the city until any and all personal property taxes, levied and assessed against such person by the city which may be due and payable at the time of the filing of the application for such license, shall have been paid (Applies to Warren businesses only) / THIS LICENSE IS NOT TRANSFERABLE & NON-REFUNDABLE**

*** Note: New dwelling or new owner must obtain a new Certificate of Compliance from the Building Department**

OFFICE USE ONLY

DEPARTMENT APPROVAL:

POLICE: ☐ BUILDING: ☐

Issued by: Computer Entry ☐ Paper License ☐ CC: ASSESSING ☐ MACHINE STICKER #:

LICENSE EXPIRES: 08/31/20_____ FEE $

MERCHANDISE/SERVICE VENDING MACHINE DISTRIBUTOR LICENSE NO. LATE FEE* $

** Applied if renewal application received after 08/31*

☐ PAID ☐ OTC ☐ MAIL

MERCHANDISE/SERVICE VENDING MACHINE LIST (DISTRIBUTOR)

DISTRIBUTOR NAME: **TOTAL # OF MACHINES:**

BUSINESS NAME (LOCATION OF MACHINES)	BUSINESS ADDRESS	BUSINESS OWNER NAME	MACHINE DESCRIPTION	# OF MACHINES	MANUFACTURER'S NAME	MECHANICAL FEATURES	SERIAL NUMBERS