

BURT TOWNSHIP, Alger County
PO Box 430, Grand Marais, MI 49839
APPLICATION FOR NON-RESIDENT TRANSIENT MERCHANT LICENSE

THIS FORM MUST BE FILED AT LEAST 30 DAYS IN ADVANCE

I, (please print) _____ hereby make application under Ordinance Number 012 of the Township of Burt, Michigan. I hereby declare I am _____ years old and my date of birth is _____ and my address is: (please print) _____, (City) _____, (County) _____, (State) _____, (Zip) _____. I have resided at this address for _____ years.

My business address is (please print) _____, (City) _____, (County) _____, (State) _____, (Zip) _____.

I propose to conduct, in the Township of Burt, the sale of _____ distributed by _____ for a period of _____ day(s) on _____, 20____ to _____, 20____ at _____ (location – determined by Township. If on private property, letter from property owner required before license will be issued). Day(s) of set-up will be determined by the Township.

Permit desired: _____ \$20.00 Daily or _____ \$35.00 Weekend
Date PAID _____, 20____. CHECK NUMBER _____ OR CASH.

Signature

Subscribed and sworn to before me a Notary Public in and for the County of Alger, State of Michigan.

Signature

My Commission Expires _____

DO NOT WRITE BELOW THIS LINE

Township Treasurer: Applicant (is) (is not) delinquent in taxes owed Burt Township. Applicant (is) (is not) found to be in debt to Burt Township in any other manner.

Application is (Granted) (Denied): _____
Signature Date

Zoning Ordinance Enforcement Officer: Location of Activity as stated by applicant (is) (is not) in accordance with the Burt Township Zoning Ordinance.

Application is (Granted) (Denied). _____
Signature Date

Alger County Sheriff Department: A file check shows / does not show outstanding criminal charges against the applicant. The business to be conducted does not / does show intent to defraud and / or cheat the public.

Application is (Granted) (Denied). _____
Signature Date