



VILLAGE OF SPRINGVILLE

LICENSE APPLICATION

All licenses issued under Chapter 110 of the Code of the Village of Springville are issued by the Village Clerk, after approval by the Board of Trustees and payment of proper fees.

Please supply the following information. NOTE: Misrepresentation or false information may be cause for denial of or non-renewal of license. Use additional sheets if more space is needed.

1. Name under which business or activity is to be conducted:

2. Name and residence address of applicant. If a corporation, also provide the names and residence addresses of the president and secretary. If a partnership, provide the names and addresses of all partners:

NAMES	ADDRESSES
_____	_____
_____	_____
_____	_____
_____	_____

3. Present principal business address of applicant. If a corporation, give principal office address:

4. Address or other location of business or activity to be conducted in Springville:

5. Residence(s) of applicant during the past five (5) years, if an individual:

6. Full statement of the nature and scope of business or activity to be conducted in Springville. Provide site plan and complete details for planned business or activity, including dates, places, times, route, products, services, number of

persons engaged in activity. Include number, location, size and description of any vehicles, tents, stands, exhibits, tables, etc. List anticipated signs, loudspeakers, music and other such information to enable the Village to determine the exact nature and full scope of your anticipated business or activity for which this license is requested:

7. Has the applicant ever been denied a license or had a license to conduct business herein described revoked? ____yes ____no

If yes, please provide details: _____

8. Has the applicant ever been arrested or convicted of a misdemeanor/felony? ____yes ____no

If yes, please provide details including the nature of the offense for which you were arrested or convicted, the date of the conviction and the place where each conviction was obtained:

9. Telephone number of applicant: _____Home _____Business

10. Name and address of attorney representing applicant in this application, if any:

NAME	ADDRESS
_____	_____
_____	_____

11. Name and address of registered agent for service of process, if applicant is a corporation:

NAME	ADDRESS
_____	_____
_____	_____

12. Give names and addresses of references where applicant was previously licensed for the same or a similar business or activity:

NAME	ADDRESS
_____	_____
_____	_____
_____	_____

The undersigned has read the foregoing application and states that, to the best of his own knowledge, it is true and complete and that is given to request that the Village of Springville issue a license to the applicant to engage in the business or activity described in this application.

Signature of individual Applicant, or
Authorized Officer of or Partner in
Corporation

Print Name

Title

Date of Application

FOR VILLAGE USE:

Date Approved: By Motion of: Seconded By:

Fee: \$ _____ Comments/Instructions: _____

