

CITY OF WAUSAU LICENSE APPLICATION

CHRISTMAS TREE DEALERS

407 GRANT STREET, WAUSAU WI 54403, PH # (715) 261-6620

Date of Application: _____ Licensing Year: _____

CHRISTMAS TREE DEALER

Name of Business:	_____	Ownership Type:	_____
Business Address:	_____	Business Phone:	_____
Name of Business Owner or Agent:	_____	Date of Birth:	_____
Owner/Agent Address:	_____	Telephone #:	_____
Owner/Agent Drivers License #	_____	DL Issuing State	_____
		WI Seller's Permit #	_____

LOCATIONS OF TREE SALES IN THE CITY OF WAUSAU BY THIS DEALER

Location #1 Name: _____
Address: _____ \$ _____

Location #1 Name: _____
Address: _____ \$ _____

_____ TOTAL OF ALL LICENSES DUE \$ _____

Note: If you have more than three locations, please xerox this form for additional pages.

I hereby certify the foregoing answers are true and correct. I agree, in consideration of the grant of this license, to comply with the laws of the State of Wisconsin, the Municipal Code and the rules and regulations of the various regulatory agencies and commissions the City of Wausau pertaining to the supervision of activities permitted under the license for which this application is made. I understand this license may be revoked by the issuing authority according to the law. Section 111.321, 111.322, 111.325 & 111.335, Wisconsin Statutes, limits the information a licensing agency may ask regarding the arrest and conviction record of an applicant. If you have been arrested and the charges are still pending and this license requires you to qualify for a fidelity bond, or if the pending charges substantially relate to the activity for which you seek the license, you must provide such arrest information on this application. If you have been convicted of a felony, misdemeanor or other offense which substantially relates to the circumstances of the licensed activity or if you must qualify for and post bond, you shall enter such information on this application. Take notice, the state law provides the City may suspend or revoke a license issued upon his application if the applicant fails to provide this information. If you have doubts as to what you must enter see your own lawyer, or the Wisconsin Department of Industry, Labor and Human Relations. City employees shall not advise you on this matter.

Enter applicable arrest and conviction information here: _____

(Applicant Signature)

LICENSE FEE ENCLOSED: \$ _____

Submit the completed application along with the license fee to the City Clerk at 407 Grant Street, Wausau, WI 54403