



"meeting community needs
.....enhancing quality of life"

FEES ARE NON-REFUNDABLE		Date Recv'd <u>4/20/21</u>
License Fee - Local	\$207.00	Acct. CLSALV
License Fee - Out of City	\$ 82.00	Acct. CLSALV
		Receipt <u>2013-4</u>
License period July 1 to June 30		

APPLICATION for SALVAGE DEALER'S LICENSE

Please allow 4 weeks for processing

SECTION 1 – BUSINESS INFORMATION – Answer all questions completely. Please PRINT clearly											
Business Name <u>Mach W Motors</u>											
Business Street Address <u>600 E Hancock St</u>				City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>			
Business Telephone Number <u>920-202-2201</u>											
SECTION 2 – APPLICANT INFORMATION											
Name <u>Kara Tullberg</u>											
Home Street Address <u>98 Estnerbrook Ct</u>				City <u>Appleton</u>		State <u>WI</u>		Zip <u>54915</u>			
Date of Birth <u>●●●●</u>			Male	Female <input checked="" type="checkbox"/>	Telephone Number <u>●●●●●●●●</u>						
SECTION 3 – CORPORATION INFORMATION – List names, addresses and dates of birth of all officers.											
President		Last <u>Tullberg</u>		First <u>Charles</u>		Middle Initial <u>D</u>		Date of Birth <u>●●●●</u>		Male <input checked="" type="checkbox"/>	Female
Address <u>98 Estnerbrook Ct</u>				City <u>Appleton</u>		State <u>WI</u>		Zip <u>54915</u>			
Vice President		Last <u>Tullberg</u>		First <u>Kara</u>		Middle Initial <u>L</u>		Date of Birth <u>●●●●</u>		Male	Female <input checked="" type="checkbox"/>
Address <u>98 Estnerbrook Ct</u>				City <u>Appleton</u>		State <u>WI</u>		Zip <u>54915</u>			
Secretary		Last		First		Middle Initial		Date of Birth		Male	Female
Address				City		State		Zip			
Treasurer		Last		First		Middle Initial		Date of Birth		Male	Female
Address				City		State		Zip			
SECTION 4 – PENALTY NOTICE											
I certify that I am familiar with Section 9.386 of the Municipal Code of the City of Appleton and agree that any license granted under this application may be suspended for cause at any time by the Common Council.											
Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.											
Signature of Applicant: <u>Kara Tullberg</u>											
FOR OFFICE USE ONLY											
Dept.	Approve	Deny	By			Reason					
Police											
Fire											
City Sealer											
Inspection											
S&L		Council		Date Issued			Exp. Date		License Number		

9-24-19

Return application to: City Clerk, 100 North Appleton Street, Appleton, WI 54911-4799