FEES ARE NON-REFUNDABLE Date Recv'd $5,24 / 23$

| License Fee - Local | $\$ 207.00$ Acct. CLSALV |
| :--- | :--- |
| License Fee-Out of City | $\$ 82.00$ Acct. CLSALV |
|  | Receipt 51088-2 |

License period July 1 to June 30
*Please allow 4 weeks for processing*

| SECTION 1 - BUSINESS INFORMATION - Answer all questions completely. Please PRINT clearly |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Business Name Golper Supply Co Inc |  |  |  |  |  |  |  |  |  |  |
| Business Street Address 1810 W. Edgewand Ar. |  |  |  |  |  | City Appleton |  | $\begin{aligned} & \text { State } \\ & \omega \leq I \end{aligned}$ | $\text { Zip } 549 / 3$ |  |
| $\begin{array}{r} \text { Business Telephone Number } \\ 920-32 \end{array}$ |  |  |  |  |  |  |  |  |  |  |
| SECTION 2 - APPLICANT INFORMATION |  |  |  |  |  |  |  |  |  |  |
| Name David Golper |  |  |  |  |  |  |  |  |  |  |
| Home Street Address <br> 9 go Pleasant Avenue. |  |  |  |  |  | ${ }^{\text {City }} \text { Aighland Park }\left.\right\|^{\text {State }} \text { Z } 2$ |  |  |  | $0035$ |
| Date of Birth REDACTED |  |  |  | Male | Female | Telephone Number REDACTED |  |  |  |  |
| SECTION 3 - CORPORATION INFORMATION - List names, addresses and dates of birth of all officers. |  |  |  |  |  |  |  |  |  |  |
| $\text { President } \quad \stackrel{\text { Last }}{\infty} / p e r$ |  |  |  | First David Middle Inititil |  |  | Date of Birth REDACTED |  |  | Female |
| Address 900 plasant Renue |  |  |  |  |  | City Aighlarel Aard ${ }^{\text {Sate }}$ |  |  | Zip 100035 |  |
| Vice President | Last |  |  | First |  | Middle Initial | Date of Birth |  | Male | Female |
| Address |  |  |  |  |  | City |  | State | Zip |  |
| 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 suspenderfor cause at my time by the Common Council. <br> Under penalty of law, I swear that the infqrmation provided in this application is true and correct to the best of my knowledge and belief. <br> Signature of Applicant: |  |  |  |  |  |  |  |  |  |  |
| FOR OFFICE USE ONL.Y |  |  |  |  |  |  |  |  |  |  |
| Dept. | Approve | Deny | By |  |  | Reason |  |  |  |  |
| Police |  |  |  |  |  |  |  |  |  |  |
| Fire |  |  |  |  |  |  |  |  |  |  |
| City Sealer |  |  |  |  |  |  |  |  |  |  |
| Inspection |  |  |  |  |  |  |  |  |  |  |
| S\&L 06/14/23 | Council 06/21/23 |  |  | Date Issued |  | Exp. Date |  | License Number |  |  |

