



LICENSE APPLICATION

for
 PAWNBROKER
 X SECONDHAND ARTICLE DEALER
 SECONDHAND JEWELRY DEALER
 SECONDHAND ARTICLE DEALER MALL/FLEA MARKET

FEES ARE NON-REFUNDABLE		Date Rec'd <u>5/2/22</u>
<input type="checkbox"/> Pawnbroker	\$217.00	Acct. CLLPWN
<input checked="" type="checkbox"/> Secondhand Article	\$97.00/\$82.00	orig/rnw (see below)
<input type="checkbox"/> Secondhand Jewelry	\$97.00/\$82.00	orig/rnw (see below)
<input type="checkbox"/> Secondhand Mall/Flea	\$172.00	Acct. CLLSMF
Receipt # <u>3570-1</u>		

<input checked="" type="checkbox"/> Original Application	Acct Code: CLLSJW
<input type="checkbox"/> Renewal	Acct Code: CLLSJR

Please allow 4 weeks for processing

Instructions: Individual license – Complete Sections 1, 2, 3 and 6
 Partnership license – Complete Sections 1, 2, 3, 4, and 6
 Corporate license – Complete Sections 1, 2, 3, 5, and 6

Return application and required fees to:
 OFFICE OF THE CITY CLERK, 100 N. APPLETON STREET
 APPLETON, WI 54911

SECTION 1 – APPLICANT INFORMATION					
Applicant Name (Last, First, MI)		Sex	Race	Date of Birth	Place of Birth (City & State)
Bartlett, Adam, L		M	W	●●●●	Oshkosh, WI
Street Address	City	State	Zip	Home Telephone Number	
824 Powers St	Oshkosh	WI	54901	●●●●●●	
SECTION 2 – CONVICTION RECORD					
Have you, or any other person listed on this application, been convicted of any of the following:					
A felony within the last ten (10) years? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
Within the last ten (10) years of:					
A misdemeanor? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
A statutory violation punishable by forfeiture? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
A county or municipal ordinance violation? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
For each "YES" response provide the date of arrest, the nature of the offense and conviction information: _____					

SECTION 3 – BUSINESS INFORMATION					
Business Name	Street Address	City	State	Zip	Telephone Number
Eroding Winds LLC	229 East College Ave	Appleton	WI	54911	9202307433
Owner's Name	Street Address	City	State	Zip	Telephone Number
Adam Bartlett	824 Powers St	Oshkosh	WI	54901	●●●●●●
Business Manager's name	Street Address	City	State	Zip	Telephone Number
same as above	824 Powers St	Oshkosh	WI	54901	●●●●●●
Building Owner's Name	Street Address	City	State	Zip	Telephone Number
Noble Assets	600 E Parkway Blvd	Appleton	WI	54911	●●●●●●

SECTION 4 – PARTNERSHIP INFORMATION

Partnership Name:

List name, address, sex, race and date of birth of all partners. Attach additional sheets, if necessary

Name (Last, First, MI)	Sex	Race	DOB	Street Address	City	State	Zip

SECTION 5 – CORPORATE INFORMATION

Corporation Name: Eroding Winds LLC
 State of Incorp. WI

List name, address, sex, race and date of birth of all partners. Attach additional sheets, if necessary

Name (Last, First, MI)	Sex	Race	DOB	Street Address	City	State	Zip
Bartlett, Adam, L	M	W	●●●●	824 Powers St	Oshkosh	WI	54901

SECTION 6 – PENALTY NOTICE

I understand that this license may be denied or revoked for fraud, misrepresentation or false statements contained in the application or for any violation of Wis. Stats. §§ 134.71, 943.34, 948.62 or 948.63.

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge. I agree to inform the clerk within ten (10) days of any change in the information supplied in this application.

Signature of Applicant: *Adam Bartlett* Date 4 / 29 / 22

FOR OFFICE USE ONLY

Dept	Approve	Deny	By	Reason
POLICE				
FIRE				
COM DEVELOPMENT				
CITY SEALER				

Safety and Licensing	Common Council	Date Issued	Expiration Date	License Number
<u>5 / 11 / 22</u>	<u>5 / 18 / 22</u>	___/___/___	___/___/___	