



OFFICE OF CITY CLERK
FILED
 FEB 09 2018
 APPLETON, WISCONSIN

FEES ARE NON-REFUNDABLE		Date Recv'd
<input type="checkbox"/> Pawnbroker	\$210.00	Acct. 11030.4316
<input checked="" type="checkbox"/> Secondhand Article	\$90.00 /\$75.00	Acct. 11030.4316
<input type="checkbox"/> Secondhand Jewelry	\$90.00 /\$75.00	Acct. 11030.4316
<input type="checkbox"/> Secondhand Mall/Flea	\$165.00	Acct. 11030.4316
<input type="checkbox"/> Investigation fee	\$ 7.00	Acct. 100.2359
Total fee paid \$ <u>97.</u>		Receipt # <u>4808305</u>

LICENSE APPLICATION

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

Original Application
 Renewal

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)
Bertotto, Andrea J.		F	Wh	[REDACTED]	Beaver Dam
Street Address	City	State	Zip	Home Telephone Number	
12810 N Townhall Rd	Chilton	WI	53014	[REDACTED]	

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? YES NO

Within the last ten (10) years of:

A misdemeanor? YES NO

A statutory violation punishable by forfeiture? YES NO

A county or municipal ordinance violation? YES NO

For each "YES" response provide the date of arrest, the nature of the offense and conviction information:

2015 Traffic

2015 Disorderly Conduct

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SECTION 3 – BUSINESS INFORMATION

Upcycled Remains (currently)					
Business Name	Street Address	City	State	Zip	Telephone Number
Rural Art-ifacts	137 S Walter	Appleton	WI	53014	920-904-1966
Owner's Name	Street Address	City	State	Zip	Telephone Number
Andrea Bertotto	12810 N Townhall Rd	Chilton	WI	53014	920-904-1966
Business Manager's name	Street Address	City	State	Zip	Telephone Number
Building Owner's Name	Street Address	City	State	Zip	Telephone Number
Walter Aue Merchantile	35 Lamplighter Ct	Appleton	WI	54914	

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: State of Incorp.

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 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: Andrea Berdick Date 2, 8, 18

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
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Reasonable accommodations for persons with disabilities will be made upon request and if feasible.