

	<b>FEES:</b>		<b>PLEASE RETURN TO:</b> Planning and Development 25 West Main Street Auburn, WA 98001 Phone: (253) 931-3090 Fax: (253) 931-3114
	<b>Motor Vehicle Wreckers</b>	<b>\$70.00</b>	
	<b>Renewal of Motor Vehicle Wrecker License</b>	<b>\$20.00</b>	
	<b>Business License Fee</b>	<b>\$50.00</b>	
	<b>Business License Renewal Fee</b>	<b>\$50.00</b>	

**APPLICATION FOR MOTOR VEHICLE WRECKERS INDIVIDUAL LICENSE**

The Auburn Municipal Code requires that business activity which meet the criteria for individual licenses be applied for in addition to a City of Auburn business registration from the City Clerk's office. City of Auburn business registrations and individual licenses are required to be renewed by December 31<sup>st</sup> of each year.

<b><u>CHECKLIST/REQUIREMENTS:</u></b>		<b><u>MOTOR VEHICLE PERMIT RIGHTS:</u></b>
Date of Application: _____		Permit becomes VOID and automatically CANCELED unless the motor vehicle wrecking yard is operating within 180 days from the date of application.
Petition to Rezone Pending?      Yes <input type="checkbox"/> No <input type="checkbox"/>		
Motor Vehicle Permit Canceled?    Yes <input type="checkbox"/> No <input type="checkbox"/>		

<b><u>MOTOR VEHICLE WRECKERS BUSINESS INFORMATION:</u></b>			
Name: _____			
Address: _____			
City: _____	State: _____	Zip: _____	Telephone: _____

<b><u>APPLICANT'S INFORMATION:</u></b>			
Name: _____			
Address: _____			
City: _____	State: _____	Zip: _____	Telephone: _____
Maiden Name: _____		Alias/Previous Name: _____	
Drivers License No.: _____	Eye Color: _____	Hair Color: _____	
Sex: M <input type="checkbox"/> F <input type="checkbox"/>	HT: _____	WT: _____	
Social Security No.: _____	Date of Birth: _____	Place of Birth: _____	
U.S. Citizen: Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please indicate status: _____			
Previous Home Address Past (5) years:			
1. _____		2. _____	
Previous Employment Past (5) years:			
1. _____		2. _____	

STATE OF WASHINGTON  
 COUNTY OF KING

I, \_\_\_\_\_, being first duly sworn, on oath deposes and says: I am the above named applicant and make this affidavit for the purpose of obtaining from the City of Auburn an MOTOR VEHICLE WRECKERS individual license. I have personal knowledge of the matters stated in the individual license application, and the statements therein contained are true. I have read the individual license regulation in Auburn City Code 8.24 and the legal requirements contained therein.

I, \_\_\_\_\_, hereby give permission to the City of Auburn to conduct an investigation into my background. I waive any and all claims against any company, corporation or individual pertaining to information received from such company, corporation or individual by the city as a result of such investigation.

\_\_\_\_\_  
 Signature of Applicant

Subscribed and sworn before me this \_\_\_\_ date of \_\_\_\_\_, 20\_\_\_\_, Notary Public in and for the State of Washington, residing at \_\_\_\_\_ My Commission Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Signature: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
<input type="checkbox"/> Planning _____	<b>Date Received:</b> _____
<input type="checkbox"/> Building _____	<b>Amount Paid:</b> _____
<input type="checkbox"/> Fire _____	<b>TR Receipt #:</b> _____
<input type="checkbox"/> Police _____	<b>Business License #:</b> _____