

FORTUNE TELLING LICENSE



OFFICE OF THE WARREN CITY CLERK
PAUL WOJNO
ONE CITY SQUARE, SUITE 205
WARREN, MI 48093-2393
(586) 574-4557 / FAX (586) 574-4556

FEE: \$150.00 ANNUALLY
\$10.00 BACKGROUND CHECK FEE
(\$160.00 TOTAL)

LICENSE EXPIRES: March 31, 20____

10% penalty for renewal applications recieved after this date

I hereby apply for a license to operate a fortune telling business within the City of Warren in compliance with the Code of Ordinances of the City of Warren. (Chapter 6, Section 6-331, Chapter 18, Section 18-18)

NEW RENEWAL

PLEASE COMPLETE APPLICATION IN FULL

BUSINESS NAME: _____ PHONE: _____

BUSINESS ADDRESS: _____ Warren, MI
street city state zip

OWNER NAME: _____ PHONE: _____

HOME ADDRESS: _____
street city state zip

DATE OF BIRTH: _____ / _____ / _____

EMAIL ADDRESS: _____

APPLICANT NAME: _____ PHONE: _____

APPLICANT ADDRESS: _____
street city state zip

(CONTINUED ON SECOND PAGE)

I certify that all statements on this application are true. I understand that any false information may result in the revoking of the above license.

Signature: _____

Print Name: _____

Preferred Mailing Address: Business Address Owner Address

Other: _____
street city state zip

REQUIREMENTS:

- COPY OF YOUR DRIVER'S LICENSE OR STATE ID
- FINGER PRINTS DONE AT THE WARREN POLICE DEPARTMENT
- PHOTO OF APPLICANT (TAKEN WITHIN SIXTY (60) DAYS IMMEDIATELY PRIOR TO THE DATE OF FILING, 2" X 2" SHOWING THE HEAD AND SHOULDERS IN A CLEAR AND DISTINGUISHING MANNER)

* In accordance with the Warren Code of Ordinances mandated in Section 18-9: No license shall be issued or renewed under the provisions of this chapter or any other ordinance of the city until any and all personal property taxes, levied and assessed against such person by the city which may be due and payable at the time of the filing of the application for such license, shall have been paid (Applies to Warren businesses only) / THIS LICENSE IS NOT TRANSFERABLE & NON-REFUNDABLE

* Note: New dwelling or new owner must obtain a new Certificate of Compliance from the Building Department

OFFICE USE ONLY

DEPARTMENT APPROVAL:

POLICE APPROVAL: _____ DATE: _____

FIRE DEPARTMENT: _____ DATE: _____

Issued by _____ Computer Entry Paper License

LAST YEAR'S LICENSE NO. _____ FEE \$ _____

_____ LATE FEE \$ _____

_____ CHECK # _____

FORTUNE TELLING LICENSE NO. _____ RECEIPT # _____

BUSINESS NAME: _____

APPLICANT DATE OF BIRTH: _____ / _____ / _____

HGT _____ WGT _____ SEX _____ EYES _____ HAIR _____

LIST ALL ADDRESSES PRIOR TO THIS APPLICATION IN THE LAST FIVE YEARS:

_____ street _____ city _____ state _____ zip

BUSINESS, OCCUPATION, OR EMPLOYMENT FOR **FIVE** YEARS PRIOR TO THIS APPLICATION:

LIST ANY AND ALL CONVICTIONS OF ANY CRIME(S) WITHING **SEVEN** YEARS PRIOR TO THIS APPLICATION:

COURT OF _____
SENTENCE IMPOSED _____

HAVE YOU EVER BEEN ISSUED A PERMIT TO DO FORTUNE TELLING OR ANY RELATED BUSINESS? YES NO

IF YES, PLEASE LIST THE FOLLOWING:

ISSUING AGENCY _____

CITY, COUNTY, AND STATE _____

DATE OF ISSUANCE _____

WAS THIS LICENSE EVER SUSPENDED OR REVOKED? IF YES, PLEASE LIST REASON(S):

PLEASE LIST THE ADDRESS AND APPROXIMATE DATES WHEN AND WHERE YOU PRACTICED A SIMILAR BUSINESS, EITHER ALONE OR IN CONJUNCTION WITH ANOTHER:

