

CITY OF YOUNGSTOWN
FINANCE DEPARTMENT
3RD FLOOR; YOUNGSTOWN, OHIO 44503

LICENSE APPLICATION

LICENSE # _____

DATE: _____

TYPE LICENSE: _____ HAULERS _____

EXPIRATION: DECEMBER 31, 2011

APPLICANT NAME: _____ AGE _____

SOCIAL SECURITY NO: _____ - _____ - _____ TELEPHONE NO. (____) _____

IDENTIFICATION (ATTACH PHOTO COPY) _____

LOCATION (ADDRESS) _____

DOING BUSINESS AS (NAME OF COMPANY) _____

ADDRESS _____ CITY/STATE _____

ZIP CODE _____ TELEPHONE NUMBER (____) _____

PARTNERSHIP (NAME) _____ SSN# _____ - _____ - _____

NUMBER OF EMPLOYEES _____

APPLICANT SIGNATURE _____ DATE _____

RECORD CHECK – POLICE DEPARTMENT (FOURTH FLOOR, RECORDS ROOM)

RECORD _____

SIGNATURE RECORD ROOM _____ DATE _____

737.05 APPLICANTS CONVICTED OF CERTAIN OFFENSES – NO LICENSE SHALL BE GRANTED TO APPLICANTS WHO HAVE BEEN FOUND GUILTY OF THE SECOND OFFENSE OF ILLEGAL DUMPING OF LITTER OR REFUSE WITHIN A TWELVE-MONTH PERIOD, WITHOUT THE APPLICANT FIRST PAYING THE SUM OF TWO HUNDRED FIFTY DOLLARS (\$250.00) FOR A PROVISIONAL LICENSE SUBJECT TO QUARTERLY REVIEW FOR A ONE-YEAR PERIOD.

INSURANCE INFORMATION

NAME OF INSURER _____

LIABILITY AMOUNT _____ EXPIRATION _____

(ATTACH PHOTOCOPY OF PROOF OF INSURANCE)