



*FOR OFFICE USE ONLY

*Acct. # _____

CITY OF BOWLING GREEN, KENTUCKY APPLICATION FOR CONSIGNMENT SHOP LICENSE

Under Chapter 18-13.04 of the City of Bowling Green Code of Ordinances any person or business engaging in the business of promoting, operating or otherwise conducting an antique mall or consignment shop shall pay a yearly license fee of sixty (\$60.00) dollars which shall authorize the activity of individuals utilizing booths or spaces in these businesses. This annual fee shall be for the period January 1 to December 31 of each year. Any new applications for a period less than twelve (12) months shall be prorated at the rate of five (\$5.00) dollars per month for the remaining months of the annual license.

The consignment license fee shall be in addition to the occupational license registration fee and any net profit fee and shall be payable in advance to the City.

Submit this completed application and fee to City of Bowling Green KY, P. O. Box 1410, Bowling Green KY 42102-0430. For any questions concerning this application contact the License Division at 270.393.3000.

Business Name _____ Phone _____

Address _____
(Street) (City) (State) (Zip)

Contact Person _____ Phone _____

Owner/Partner/Corporate Officer Information:

Name _____ Phone _____

Residence _____
(Street) (City) (State) (Zip)

I understand that any/all information contained herein is confidential under Chapter 18-11.

Signed

Date

Credit card information is not retained in our files.



THIS INFORMATION IS CONFIDENTIAL & NOT SUBJECT TO OPEN RECORDS

Business Name _____

Please Bill VISA MasterCard Discover American Express

Credit Card Account # _____

Expiration Date: ____ - ____ - ____ Card Verification Code (found on back of card) _____

For the amount of \$ _____

Authorized Signature as it appears on card _____

Print the name and address the Visa, MasterCard, American Express or Discover monthly statement is mailed to:

Name _____ Business name if applicable: _____

Street Address or Post Office Box City State Zip Code

City forms with this page may be faxed to a secure location at 270.393.3636

If mailing this form use address below:

City of Bowling Green

P. O. Box 1410

Bowling Green, KY 42102-1410

Checklist:

1. Have you included a completed credit/debit card remittance form or a check payable to the City of Bowling Green?
2. Have you answered each question fully?
3. Have you signed your application certifying that all information is true and correct?
4. Do you have proper identification if requested at time of application?
5. Have you attached a signed/valid copy of your deed or lease if required?
6. Have all additional required documents been attached?
7. Have you given an accurate description of your product being sold or your service?
8. Have you indicated if your business will have Alcohol Sales or Live Entertainment at your business?