



[CITY OF]
O T T U M W A

SALVAGE DEALER LICENSE APPLICATION

Name of Salvage Dealer: _____

Address of Salvage Dealer: _____

Telephone Number of Salvage Dealer: _____

Business Title: _____

Business Address: _____

Individual Responsible for Operation of said Business if other than Salvage Dealer:

Name: _____

Address: _____

Telephone Number: _____

Type of material bought and sold or processed:

Legal description of area to be licensed:

Attach a plat of the proposed area to be licensed.

Type, source, and expected volume or weight of materials to be handled per day, week, year:

Give a detailed description of the process and disposal methods to be used:

List the equipment to be used, its design, capacities, and expected loads:

Attach a contingency plan detailing specific procedures to be followed in case of equipment breakdown, maintenance downtime, or fire in equipment or vehicles, including methods to be used to remove or dispose of toxic, hazardous, and general waste.

I depose and say that if granted a Salvage Dealer License, I will obey all laws of the State of Iowa, and ordinances of the City of Ottumwa, Iowa, pertaining to said license. All statements made above are true and correct to the best of my knowledge and information. Dated this _____ day of _____, 20____.

Signature of Applicant

License fee of \$100.00 is to be paid at the time of filing this application. If you are a new applicant filing between October 1 and March 31, the license fee will be \$50.00. License term is April 1 to March 31 of each year.

Date filed: _____

Date submitted to Council: _____

License No.: _____

Receipt No.: _____