



City of
GRAND HAVEN, MICHIGAN

AUCTION/AUCTIONEER APPLICATION

Please return application to: City of Grand Haven Clerk's Office
519 Washington Avenue
Grand Haven, MI 49417
www.grandhaven.org
Phone: 616-847-4886
Fax: 616-842-0648

Fees: Auction: \$10 Surety Bond: \$2,500
Auctioneer License: \$25 Surety Bond: \$2,500

Type of License Sought: License to conduct an Auction
Auctioneer License
Both of the Above

Business/Property Owner Information Conducting the Auction:

Business/Property Owner:
Mailing Address:
City: State: Zip:
Phone (1): Phone (2):
Address of Operation:
Length of time the business has operated in the City:

Auction and Auctioneer Information:

Applicant: Birth Date:
Mailing Address:
City: State: Zip:
Phone (1): Phone (2):
Auction Location:
Date and time of the auction:

Is the auction a closing-out auction? Yes/No Is a closing-out auction being held? Yes/No

Will the auction be conducted in good faith for the purpose of retiring from business? Yes/No

Have all statutes and provisions of the Grand Haven Code of Ordinances governing closing-out sales been complied with? Yes/No

Provide a description of the property to be sold:

(If additional space is required, please complete the list on a separate sheet of paper and attach it to this application.)

Will property other than that described on this application be sold during the auction? Yes/No

Is all the property listed in the description of the property to be sold, actually located on the premises where the auction is being conducted? Yes/No

Is the property which is being sold a bona fide part of the business' stock? Yes/No

Has the property to be sold on the tax rolls of the City for one year? Yes/No

Have all taxes on the property to be sold been paid? Yes/No

Applicant's Affirmation of Truth and Understanding

It is affirmed that the information on this application is the truth. It is understood that it shall be unlawful for the auctioneer to conduct the auction any place other than that stated in the application, and it shall be unlawful for either the auctioneer or owner to do, either themselves or through their agents or servants, any act or thing contrary to the statements made in this application. In addition, it is understood that any false statement in the application, or any act done contrary to such statements are a violation of the Grand Haven Code of Ordinances and punishable under Section 1-8 of the Code of Ordinances.

X _____
Applicant's Signature

Date

X _____
Director of Public Safety Approval

Date

Clerk's Use Only

- | | |
|--|--|
| <input type="checkbox"/> Application Received _____ (Date) | <input type="checkbox"/> Application Fee Received _____ (Date) |
| <input type="checkbox"/> Approved _____ (Date) | <input type="checkbox"/> Proof of Bond for Auction _____ (Date) |
| <input type="checkbox"/> Denied _____ (Date) | <input type="checkbox"/> Proof of Bond for Auctioneer _____ (Date) |

