

APPLICATION FOR JUNK DEALERS LICENSE

ORDINANCE NO 2-82

JUNKYARD NAME	
PHYSICAL LOCATION	
MAILING ADDRESS	
TELEPHONE	
WEBSITE	
EMAIL	
ARD MANAGER	
NUMBER OF YEARS IN OPERATION	
NAME	_
TELEPHONE	
EMAIL	
OWNER NAME ADDRESS	
PARCEL #	
TELEPHONE	
EMAIL	
have read and am familiar with Ordinance # 2-a requirements of the same.	82 of Greene Township and do hereby agree to meet all
Landowner Signature	Witness
х	Х
Junkyard Manager Signature	Witness

