



**CITY OF BROOKFIELD**  
**SCRAP METAL COLLECTORS AND DEALERS APPLICATION**

License Fee: \$200.00

Background Check Fee: \$12.00

*(License valid January to December)*

**PLEASE PRINT**

Applicant's Name *(First, MI, Last)*: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone# \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone# \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

STATEMENT LISTING ANY CONVICTION OR PENDING CONVICTION FOR OFFENSES RELATING TO THEFT, BURGLARY, POSSESSION OF STOLEN PROPERTY, OR OTHER CRIMES RELATING TO PROPERTY.

Date/Location: \_\_\_\_\_ Offense: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date/Location: \_\_\_\_\_ Offense: \_\_\_\_\_

Disposition: \_\_\_\_\_

*(Attach addition sheets if necessary)*

**\*\*\*NOTE: Each individual/employee must carry a copy of the license when collecting/dealing with scrap metals.**

**READ CAREFULLY BEFORE SIGNING:** I declare under penalty of law that all of the above information is true and correct to the best of my knowledge and belief. I understand that incomplete or incorrect information may lead to denial of this license.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/City Clerk

