

City of Minot

Minot Police Department

Application for a Merchant License

Minot Code of Ordinances Section 18-51.

Office Address: 515 2nd Ave SW

Mailing Address: PO Box 5006

Minot, ND 58702

Email: records@minotnd.org

(701) 837-3658

APPLICANT INFORMATION:

Last Name

First Name

Middle Initial

Previous Names

Applicant Address

Previous Addresses (two years)

Phone

Driver's License #

State

Date of Birth

SSN

Birthplace

Race

Hair

Eyes

Height

Weight

Company Represented

Address

Phone Number

Supervisor Name

Have you ever been convicted of a felony? Yes No

If yes, charge/offense:

DISCLAIMER AND SIGNATURE:

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

INTERNAL USE ONLY:

Please attach:

1. A Current Color Photo
2. Fingerprints
3. Copies of Bond
4. State License
5. Receipt