BUILDING WRECKER YEARLY LICENSE APPLICATION

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

Fee: $25 per year
Bond: $5,000
Insurance: P/L 50/300,000 – P/D 1,000,000
(proof of workers comp coverage required for permits)
City of Grand Haven needs to be listed as an additional insured

Applicant Information:
Applicant: ____________________________________________________________________
Birth Date: _________________________
Mailing Address: __________________________________________________________________
City: __________________________________ State: __________ Zip: _______________
Phone (1): ____________________________ Phone (2): _________________________
Address of Operation: ____________________________________________________________

Applicant’s Affirmation of Truth and Understanding
The undersigned, by the execution of this application, agrees to conform to all the terms and provisions of the Code
of Ordinances of the City of Grand Haven and does represent that he/she has read the forgoing application by
him/her signed, and know the contents thereof, and that the same is true of his/her own knowledge, except as to the
matters therein stated to be upon his/her information and belief, and as to those matters he/she believes it to be true.

X
Applicant Signature
Drivers License #

X
Building Inspector Approval
Date

X
Director of Public Safety Approval
Date

Clerk’s Use Only
☐ Application Received _________ (Date) ☐ Application Fee Received _________ (Date)
☐ Approved _________ (Date) ☐ Proof of Surety Bond _________ (Date)
☐ Denied _________ (Date) ☐ Proof of Insurance _________ (Date)
(City named as additional insured)
**GRAND HAVEN**  
**DEPARTMENT OF PUBLIC SAFETY**  
525 Washington Avenue  •  Grand Haven, MI 49417  
Office 616.842.3460  •  Fax 616.847.6050  

**LAW ENFORCEMENT BACKGROUND CHECK**

I am making application as indicated below for the purpose of operating a business or other enterprise within the City of Grand Haven. I understand that my application requires a check of local and/or criminal law enforcement and driving records. My signature represents a request to the Grand Haven Department of Public Safety to perform the law enforcement records check indicated.

<table>
<thead>
<tr>
<th>Activity Type</th>
<th>Record Check</th>
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<tbody>
<tr>
<td>Auction/Auctioneer – Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Bed &amp; Breakfast – Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Building Mover (Yearly) License - Local Records Check</td>
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<tr>
<td>Building Wrecker (Yearly) License - Local Records Check</td>
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<tr>
<td>General Permit Application - Local Records Check</td>
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<tr>
<td>Going Out of Business Sale Application - Local Records Check</td>
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<tr>
<td>Horse Drawn Carriage Business License – Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Horse Drawn Carriage Operators License – Michigan ICHAT &amp; Local Records Check</td>
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<td>Junk Dealer License - Michigan ICHAT &amp; Local Records Check</td>
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<td>Medical Marihuana Facilities - Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Metal Detectors License - Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Pedicab Business License - Local Records Check</td>
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<tr>
<td>Pedicab Operators License - Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Permanent Liquor License – Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Permanent Vendor Application – Michigan ICHAT &amp; Local Records Check</td>
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<td>Precious Metals/Gem License – Michigan ICHAT and Local Records Check</td>
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<tr>
<td>Solicitors &amp; Transient Merchants License – Michigan ICHAT &amp; Local Records Check</td>
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<tr>
<td>Sound Truck (Use General Permit Application) - Local Records Check</td>
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**WAIVER OF LIABILITY AND RELEASE OF CLAIMS**

I authorize the GRAND HAVEN DEPARTMENT OF PUBLIC SAFETY to query and release law enforcement and driving records from all sources. I release and forever discharge the City of Grand Haven and its agents, officers, and employees from any and all actions, claims and demands for, upon or by reason of any damage, loss or injury, which may be sustained by me in the nature of libel, slander, invasion of privacy or other results from errors or omissions in the information given or from the use of the information, whether by reason or unauthorized use, negligence or otherwise.