

City Attorney Approval: Yes <input type="checkbox"/> No <input type="checkbox"/>		Date:
<p>I hereby apply to license the motor vehicles listed on this application in the City of Manitowoc, Wisconsin, under all the conditions of Section 11.060 of the Municipal Code.</p> <p>Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief. Failure to answer any of the above questions truthfully will be considered grounds for denial of this license application.</p>		
Signature of Owner:		Date:
Name of Owner:	Owner's Phone Number:	
Owner's Driver License or State ID Number:	Expiration Date:	
Owner's Address:		
<p>AUTHORITY. The undersigned hereby represents and warrants that it has the authority to apply for this license. If the party applying for this license is not an individual, the person(s) signing on behalf of the entity represents and warrants that they have been duly authorized to bind the entity and apply for this license on the entity's behalf.</p>		
_____ Signature		_____ Date