SCRAP METAL PROCESSORS LICENSE APPLICATION
Baltimore County, Maryland
Department of Permits, Approvals and Inspections
County Office Building, Room 101
111 West Chesapeake Avenue
Towson, MD 21204
410-887-3616

[ ] New  [ ] Renewal  FIVE YEAR LICENSING PERIOD: ENDING DECEMBER 31, ___________________________

<table>
<thead>
<tr>
<th>Fees:</th>
<th>Application Fee: $200.00</th>
<th>5 Year Licensing Fee: $500.00</th>
</tr>
</thead>
</table>

Complete the attached “Section 21-20-105 Data Form” for each applicant, associate, partner, corporate officer, corporate director and each officer and director of a corporation owning more than 10% of the applicant’s business. Attach a copy of all organizational documents: Partnership Agreement, Articles of Organization, Etc.

**Business Form:** [ ] Sole Proprietorship; [ ] Partnership; [ ] Association; [ ] Corporation; [ ] LLC; [ ] Other

If “Other” is checked, describe the business form:

Trade Name ________________________________ Business Phone No. __________

Business Address: ________________________________ Zip Code _______

Business Mailing Address: ________________________________ Zip Code _______

If different from business address

Type of Facility: ______________________________________________________

Type of Scrap Metal Collected: __________________________________________

Name, address and telephone number of any corporation owning more than 10% of the applicant's business:

________________________________________________________________________

Location and Address of each off-site storage facility:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Applicant First Name: ___________________ Applicant Last Name _______________________

Signature of Applicant __________________________ Date ________________

OFFICE USE ONLY

License No. ______________________________

Application Fee Paid: $200  Cash Receipt No. ___________________ Cash Receipt Date ______________

License Fee Paid $500  Cash Receipt No. ___________________ Cash Receipt Date ______________

Date Issued ______________  Data Entered ___________________ By __________________

Rev 10/15
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Section 21-20-105 Data Form

Applicant name: ____________________________________________________________

Full name: ____________________________________________________________________

Relationship to applicant (Circle all that apply): sole applicant, associate, partner, corporate officer, corporate director, officer of a corporation owning more than 10% of applicant’s business or director of corporation owning more than 10% of applicant’s business

Address: ___________________________________________________________________

Maiden name: __________________________________________________________________

Aliases used previously: __________________________________________________________________

Names you have previously been known by: __________________________________________________________________

Social Security No.: __________________________ Residence phone number: __________________________

Business phone number(s) for last three (3) years (indicate time period for each number): ______________________________________

________________________________________

Business address: ______________________________________________________________________

Attach copy of government-issued photograph identification card or driver’s license.

NOTARIZED STATEMENT

State of ____________________________ County

I HEREBY CERTIFY that on this ________ day of ______________________, 20______, before me, a Notary Public of the State of __________, personally appeared ____________________________ who acknowledged himself to be related to the Applicant or the sole applicant for a license to be a scrap metal processor in accordance with Article 21, Title 20 of the Baltimore County Code, 2003 and affirmed under penalties of perjury that the contents of the application for a license to be a scrap metal processor are true to the best of his or her knowledge, information and belief.

WITNESS my hand and Notarial Seal.

Notary Public

My Commission Expires:

________________________