

City Clerk
Phone (518) 279-7134
Fax (518) 270-4639

THE CITY OF
TROY
Office of the City Clerk

Pursuant to Section 128 Code
of Ordinances
**Application for
Auctioneer License**

Name of Applicant: _____

Home Address: _____ Years at Address: _____

Business Address: _____ Years at Address: _____

Home Phone: _____ Business Phone: _____

Date of Birth: _____ Married/Single: _____

Have you ever had a Public Auctioneer's License? _____

If "Yes", in what jurisdiction? _____

Have you ever been convicted of a misdemeanor or felony? _____

If "Yes", describe the offense, when you were convicted and in what court:

Previous Employment for the last five (5) years:

Employer, Address and Phone: _____

Per § 128-6 Bond required, attach a: Bond for the sum of \$5,000 Check in the amount of \$110

** Submit copy of background check form attached to this application form.

***Attach copy of NYS Driver's License ID to this form.

BEING DULY SWORN DEPOSES AND STATES THAT HE/SHE IS THE PERSON SIGNING THE FOREGOING APPLICATION AND THE ANSWERS GIVEN TO THE QUESTIONS ABOVE ARE TRUE IN ALL RESPECTS AND PARTICULARS.

Signature of Applicant

Commissioner of Deeds / Notary Public

Approved _____

Rejected _____

Mayor: _____

Signature of the:	Date:
Corporation Counsel: _____	
Troy Police Chief: _____	
City Clerk: _____	