Telephone: (906 847-3702 Fax: (906)847-6430 Email: <u>clerk@cityofmi.org</u>

	APPLICAT	TION FOR BUSINESS LICENSE
Please indicate the type of business license you are applying for. Check only one: New Business (A business located within the City which was not licensed the previous year.) Renewal Business (A business licensed the previous year and identical to previously approved license.) Off-Island Business (A business operating within the City but not physically located within the City.)		
Name of Business: Falcon Roofing Name of Owner, Agent, or Manager: Gabriel Anderson. Location of Business: 3774 Brayton Iane Mailing Address: Telephone No: (231)409-1422 City, State, & Zip: Traverse city Mi 49685 Fax No. Type of Business: Roofing Email Address: away build III 2 Degmail State of Michigan Sales Tax Number / Social Security or FEIN: 92-1359084 Is this business a licensed trade regulated by the State of Michigan (contractor, architect, etc) Yes (If yes, please include a copy of your state license certificate) Horse or bicycle related businesses please include a copy of your certificate of liability insurance.		
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GRETCHEN WHITMER Governor

Michigan Department of Licensing and Regulatory Affairs Bureau of Construction Codes Individual Builder License

Q855622

GABRIEL J ANDERSON DBA - FALCON ROOFING 3774 BRAYTON LN TRAVERSE CITY, MI 49685

MUST BE DISPLAYED IN A CONSPICUOUS PLACE

License No. 242301194 Expiration Date: 05/31/2026

This document is duly issued under the laws of the State of Michigan