

OFFICE USE ONLY

License # \_\_\_\_\_  
Bond Received: \_\_\_\_\_  
Bond Amount: \_\_\_\_\_  
Received By: \_\_\_\_\_  
Date: \_\_\_\_\_

**2023 DEMO/TANK LICENSE APPLICATION**

City of Elkhart, Indiana  
229 South Second Street  
Elkhart, In 46516  
Ph. 574-294-5471 Fax 574-970-1361 [www.elkhartindiana.org](http://www.elkhartindiana.org)

TYPE OF APPLICATION (CIRCLE ONE ONLY) NEW RENEWAL DATA CHANGE

(PLEASE PRINT CLEARLY & FILL IN ALL AREAS)

COMPANY NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ E-MAIL \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

CIRCLE THE APPROPRIATE REGISTRATION REQUEST:

DEMOLITION                      TANK                      MOVING

**\*\*TANK CONTRACTORS MUST PROVIDE COPY OF TANK CERTIFICATION\*\***

NOTIFICATION IN WRITING IS REQUIRED WHEN MAKING ANY INFORMATION CHANGES ABOVE. THE UNDERSIGNED STATES THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_