

ST. LOUIS COUNTY, MISSOURI
APPLICATION FOR
MANUFACTURER/MANUFACTURER'S REPRESENTATIVE RESTRICTED LICENSE
FEE \$45.00 (make check payable to : St. Louis County Treasurer)

Manufacturer

Name of Manufacturer: _____

Name of Officer/Representative: _____

Office Address _____ City _____ State _____ Zip _____ Office Phone # _____

Manufacturer's Representative (if applicable)

Name of Manuf. Rep.: _____

Name of Officer/Representative: _____ SS# _____

Office Address _____ City _____ State _____ Zip _____ Office Phone # _____

I/we hereby apply for a manufacturer/manufacturer's restricted license under one of the following conditions. Please check one:

- G I)** I am a **manufacturer** of equipment and/or appliances specifically identified on letterhead accompanying this application. This application for a restricted license is for authorization of myself and my employees to supply parts and perform service work, repairs, maintenance, start-up, testing, and/or tuning of said equipment and/or appliances; **OR**

- G II)** I am a **manufacturer's representative** and attached to this application is a letter confirming the representative relationship I have with the manufacturer listed above. In addition, a list of the manufacturer's equipment and/or appliances is specifically identified on letterhead accompanying this application. This application for a restricted license is for authorization of myself and my employees to supply parts and perform service work, repairs, maintenance, start-up, testing, and/or tuning of said equipment and/or appliances.

Note: The Manufacturer or Manufacturer's Representative and their employees must be issued an identification card, to be provided by the licensee, authorizing the individual to supply parts and perform service work, repairs, maintenance, start-up, testing and/or tuning of any equipment and/or appliances which are supplied by the manufacturer listed on the letter submitted with this application.

The identification card shall contain: the name of the manufacturer and manufacturer's representative (if applicable), the restricted license number, and the name of the employee.

I hereby affirm the information provided on this application and all attachments to be true to the best of my knowledge and I hereby make application for the License indicated above.

Officer of the Manufacturer

AND

Manufacturer's Representative

Printed Name: _____

Printed Name: _____

Signature: _____

Signature: _____

Title: _____

Title: _____

Date: _____

Date: _____

1. Any misstatement or misrepresentation in said application will disqualify the applicant.
2. The applicant will be notified in writing of the action of the board following review of the application.
3. In the event an applicant fails to qualify for a license, the application fee deposited will not be refunded. If a new application for examination is made, it must be accompanied by the fee specified by law.