



Bicycle Dealer License

City of Madison Clerk
210 MLK Jr Blvd, Room 103
Madison, WI 53703

(date)

(initials)

licensing@cityofmadison.com
608-266-4601

LICBIK-20 ____ - ____

Corporation Name:	DbA (trade) Name:
Corporate Address:	Madison Address:
City, State Zip:	City, State Zip:
Contact Name:	
Contact Phone:	
Contact Email:	
License: Bicycle Dealer	Annual renewal, expires June 30th
State Seller's Permit number:	