



CITY OF CLEVELAND
Mayor Justin M. Bibb

Instructions for Junk Cart License

City of Cleveland
Division of Assessments and Licenses
601 Lakeside Avenue, Room 122
Cleveland, Ohio 44114

Phone: (216) 664-2264

Hours of Operation:
8:00 a.m. to 4:30 p.m. Weekdays

DALLicenses@clevelandohio.gov

Before completing and submitting your application to our office, please read all materials and information included. If you have any questions, please call our office at (216) 664-2264 BEFORE YOU APPLY.

A Junk Cart License is required to operate any vehicle for the purpose of collecting, transporting or selling any used or secondhand materials, including scrap metal, pipe, glass, bottles, paper, canvas, rope, rags, tires, automobile or truck parts, used building materials (except bona fide architectural antiques) and other similar materials.

This is an annual license that expires on August 31st.

As the licensee, you are expected to be completely familiar with the requirements of City of Cleveland Codified Ordinance Chapter §676, Junk and Secondhand Dealers.

City of Cleveland employees may not provide legal advice to the public. The information provided is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.

You may apply for this license in person, on-line or by mail:

In Person:

1. Gather all supporting documentation that must be submitted along with the application (see *What to bring or submit to the Division of Assessments & Licenses Section* below).
2. Complete the application in its entirety and sign (print legibly using blue or black ink).
3. Visit our office located at the address in the top right-hand corner between the hours of 8:00 a.m. and 4:00 p.m., Monday through Friday.
4. Bring the fee listed below. Acceptable forms of payment are money orders, checks, debit/credit cards and cash.

On-Line:

1. Gather all supporting documentation that must be submitted along with the application (see *What to bring or submit to the Division of Assessments & Licenses Section* below).
2. Go to <https://ca.permitcleveland.org/public/Default.aspx>, and follow the instructions on the enclosed attachment.
3. Be prepared to submit the license fee listed below plus applicable convenience fees. Acceptable forms of payment are electronic check and debit/credit cards

By Mail:

1. Gather all supporting documentation that must be submitted along with the application (see *What to bring or submit to the Division of Assessments & Licenses Section* below).
2. Make copies of all documentation.
3. Complete the enclosed application in its entirety and sign (print legibly using blue or black ink).
4. Mail the completed application, supporting documentation and fee listed below to the Division of Assessments and Licenses at the address listed above in the top right-hand corner. Acceptable forms of payment for mailed applications are Money Orders and Checks (DO NOT SEND CASH OR CREDIT CARD INFORMATION IN THE MAIL).

What to bring or submit to the Division of Assessments and Licenses:

1. Completed and signed application.
2. A **copy** of the applicant's current and valid driver's license.
3. A **copy** of the current vehicle registration.
4. A completed and notarized **Exclusive Use and Control of Vehicle Statement**. *This requirement is only applicable if the vehicle is not registered to the applicant.*
5. **Fee of \$25.00**. Fees are payable by cash, check or credit card. This fee is non-refundable. Please make checks payable to the City of Cleveland.



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Date:	Fee: \$25.00 (Non-Refundable)
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SECTION A - BUSINESS INFORMATION

BUSINESS TYPE

<input type="checkbox"/>	Person (Sole Proprietorship)	<input type="checkbox"/>	Limited Liability Company
<input type="checkbox"/>	Corporation	<input type="checkbox"/>	Partnership (General or Limited)
<input type="checkbox"/>	Other: (specify)		

Name:

DBA / Alias:

State Incorporated:

Address:

City:

State:

Zip:

Telephone:

Email:

Federal ID Number:

SECTION B - APPLICANT INFORMATION (INDIVIDUAL)

Name:

Title:

Address (Residential):

City:

State:

Zip:

Telephone:

Email:

Date of Birth:

Are you the Owner:

Yes

No

Social Security Number:

Driver's License Number:

Expiration Date:

SECTION C - VEHICLE INFORMATION

Make:

Model:

Year:

Color:

VIN #:

Vehicle License Plate #:

SECTION D - DECLARATION

I declare under penalty of perjury that the above information is true and correct. I understand that if this information is found to be fraudulent, the license issued in association with this statement will be revoked. Applicant hereby acknowledges that he/she has read and understands Codified Ordinance §676, Junk and Secondhand Dealers and understands the obligations of operating such vehicles within the City of Cleveland.

SIGNATURE OF APPLICANT

Sign Here → X