



REGISTRATION OF AUCTIONEER DOING BUSINESS AS (DBA)

State Form 43962 (R6 / 2-14)

PROFESSIONAL LICENSING AGENCY
Indiana Government Center South
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3009
Email: pla9@pla.IN.gov

Date (month, day, year)

NO FEE

REGISTRATION INFORMATION

In compliance with IC 25-6.1-3-4 (i), I hereby notify the Indiana Auctioneer Commission that I will on this (date) _____, operate in addition to my original license granted by the Commission as an Auction Company.

Name of trade or business

Address (number and street, city, state, and ZIP code)

I hereby certify that I am operating said auction company as an individual and that I am the sole owner. I also understand that at such time that I shall discontinue or change the address or trade or business name of said auction company, I shall promptly notify the Commission of such discontinuance or change in writing, pursuant to 812 IAC 1-1-14.

Signature of licensee

Date (month, day, year)

Printed name of licensee

License number

Address (number and street, city, state, and ZIP code)