



**INTER-OFFICE MEMORANDUM
BOARD OF PUBLIC WORKS**

DATE: 1/06/2026
TO: Chris Dressel, Community Investment
Derek Erquhart, Fire Department
Brad Rohrscheib, Police Department

FROM: Hillary Horvath, Clerk hhorvath@southbendin.gov

SUBJECT: **TRANSIENT MERCHANT LICENSE RENEWAL
RECOMMENDATION**

APPLICANT: Maple Hill Golf

LOCATION: Century Center

DATE OF EVENT: January 30 - January 31

**PLEASE INSERT YOUR RECOMMENDATION IN THE APPROPRIATE FIELD BELOW,
BASED ON THE FOLLOWING ORDINANCE CRITERIA (sec. 4-60):**

Community Investment: Favorable recommendation

Police: Favorable recommendation

Fire: Favorable recommendation (Inspection will be required upon set up for event)

CK 34055
\$140.00

LICENSE APPLICATION FOR – TRANSIENT MERCHANT
MUNICIPAL CODE SECTION - 4-60

I. APPLICATION TYPE Check One: New _____ Renewal X

II. BUSINESS DATA

A. Name of Event: Huge Golf Liquidation Sale

B. Business Name: Maple Hill Golf

C. Business Address: 5555 Ivanrest Ave

City: Grandville State: MI Zip: 49418

D. Mailing Address (if differs): _____

City: _____ State: _____ Zip: _____

E. Business Telephone Number: 616-538-0290 ext 161

F. Business Fax Number: _____

G. E-Mail Address: amanda@maplehillgolf.com

H. Indiana State Retailer License number: 0006001561

I. Proposed location where business will be conducted: Century Center

J. Description of building or premises to be used: Golf equipment sale

K. Proposed Dates of Operation: Jan 30-31

L. Proposed Hours of Operation: 3-7pm & 10-4pm

M. Types of goods to be sold: Golf Merchandise

N. Scales will be used in business transactions: Yes _____ No X

If yes, please attach certificate from the Sealer of Weights and Measures.

O. Food will be served in ready-to-eat condition: Yes _____ No X

P. Description of nature of proposed advertising: website & email

For Office Use Only

Application Filed JAN 05 2026 Public Works Approval _____
Application Fee Paid _____ License Fee Paid _____
Sent to Dept. _____ License Number TRM2026-001

Not Approved _____
Reason _____

CITY OF SOUTH BEND, INDIANA
BOARD OF PUBLIC WORKS

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Breana N. Micou, Member

Hillary R. Horvath
Attest: Hillary R. Horvath, Clerk

Date: January 27, 2026

LICENSE APPLICATION FOR – TRANSIENT MERCHANT
MUNICIPAL CODE SECTION - 4-60

V. PERSONAL DATA (Additional Owner, if applicable)

A. Owner's Legal Name: Amanda Kitchen
B. Residential Address: [REDACTED]
City: Byron Center State: MI Zip: 49315
C. Residential Telephone Number: [REDACTED]
D. Cellphone Number: _____
E. Position with business: Owner
F. Social Security Number: [REDACTED]
G. Gender: [REDACTED]
H. Date of birth: [REDACTED]
I. Race: [REDACTED]

VI. INCLUDE \$5.00 PROCESSING FEE WITH APPLICATION

VII. INCLUDE NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF ALL GROUP EVENT PARTICIPANTS.

VIII. INCLUDE A CURRENT CERTIFICATE OF LIABILITY INSURANCE WITH THE CITY OF SOUTH BEND LISTED AS THE CERTIFICATE HOLDER.

IX. AFFIRMATION

I, hereby, certify and affirm that all of the information I have given in this application is true and accurate to the best of my knowledge. I further certify that I have in no way attempted to mislead the City in this application by omitting facts known to me. I understand that the completed application must be filed no later than thirty days before the planned event is to begin. I have read and understand the regulations of the Transient Merchant license found in the City of South Bend Municipal Code, Section 4-60.

Amanda Kitchen

Signature

12/23/25

Date

Please note that we have moved to the new South Bend City Hall. Our new address is:

City of South Bend
Department of Community Investment
215 S. Dr. Martin Luther King Jr. Blvd., Suite 500
South Bend, IN 46601

