



PEDDLER & SOLICITOR LICENSE APPLICATION

GENERAL INFORMATION

_____ <i>Applicant Name</i>		() _____ <i>Phone</i>	() _____ <i>Cell Phone</i>
_____ <i>Home Street Address</i>		_____ <i>City, State, Zip</i>	
_____ <i>Social Security Number</i>	/ / _____ <i>Date of Birth</i>	_____ <i>Driver's License Number</i>	_____ <i>State</i>
_____ <i>Height (ft/in)</i>	_____ <i>Weight (lbs)</i>	_____ <i>Eye Color</i>	_____ <i>Hair Color</i>
_____ <i>Vehicle Make</i>	_____ <i>Vehicle Model</i>	_____ <i>Color</i>	_____ <i>License Number</i>
List 3 cities applicant conducted business in: _____ _____ _____			

BUSINESS & PRODUCT INFORMATION

_____ <i>Business/Organization Name</i>	_____ <i>Supervisor/Other</i>	() _____ <i>Phone</i>
_____ <i>Home Street Address</i>	_____ <i>City, State, Zip</i>	
Type(s) of product(s)/service(s): _____ _____		
Delivery method: _____		
Dates: _____ _____ _____	Days of Week: _____ Times: _____ Number of employees: _____	

BACKGROUND CHECK INFORMATION

Have you ever been convicted of any crime (other than petty traffic violations)? Yes No
If Yes, please explain: _____

Have you ever applied for and been rejected, or received a peddler, solicitor or transient merchant license and had it suspended or revoked within the past three years? Yes No
If Yes, please explain: _____

AUTHORIZATION

THE STATEMENT BELOW MUST BE SIGNED BEFORE A NOTARY

I hereby authorize the City of Independence and West Hennepin Public Safety to have access to all sources of information that may be consulted to verify the information I have provided above. This includes authorization to check criminal history records if asked to provide that information.

I agree to operate such business in accordance with the laws of Minnesota and the ordinances of the City of Independence. The foregoing statements are true and correct to the best of my knowledge and belief.

Date of application

Signature of applicant

Subscribed and sworn to me, a Notary Public, on this _____ day of _____, 20__.

Signature of Notary

My Commission expires on _____.

(Notary Seal)

Date referred to Director of Public Safety

Recommendation of Director of Public Safety

Approved Denied

Reason for denial: _____

Date of approval/denial

Signature of Director of Public Safety

Date license issued

Signature of City Official

Date

License Fee: \$100

Fees Collected: _____

Fees Collected By: _____

ITEMS TO SUBMIT WITH APPLICATION

- Copy of credentials establishing relationship with company.
- Photocopy of driver's license, state ID card or passport.
- Non-refundable fee.
(Check payable to "City of Independence.")

NOTICE TO APPLICANT

- The City will try to process all applications as soon as possible; 5 business days may be required.
- Each applicant will need to submit his/her own application and pay all applicable fees.
- All applicants will receive a license form. Forms must be present at all times while working in the City.