

CITY OF WATKINS

P.O. BOX 306
Watkins, MN 55389

LICENSE APPLICATION

LICENSE TYPE: PEDDLER, SOLICITOR, TRANSIENT MERCHANT

Peddler: A person who offers merchandise or services for sale door-to-door, including house-to-house, business-to-business, street-to-street, or any other type of place-to-place movement. Delivery and payment occur immediately.

Solicitor: A person who obtains orders for merchandise or services for future delivery. Registration required.

Transient Merchant: A person who temporarily sets up business out of a vehicle, trailer, boxcar, tent, other portable shelter, or empty store front for the purpose of selling goods. Individuals may not remain in a location for more than 14 consecutive days. Delivery and payment occur immediately.

APPLICATION CHECKLIST

1. **License Application** ***Must be received 14 days prior to conducting business
2. **Photo ID:** Attach a color copy of a driver's license or government issued photo ID
3. **Written Permission of Property Owner** – (for Transient Merchant)
4. **Fee:** 1st Day - \$75.00, Each Additional Day - \$15.00, Annual - \$225.00

BACKGROUND INFORMATION

Applicant's Full Legal Name

Peddler _____

Solicitor _____

Transient Merchant _____

All other names you have used or conducted business under (First, Middle, and/or Last)

Residence Address

City

State

Zip

Local Address (if residence address is out of state) City

State

Zip

Social Security or Individual Tax ID

E-Mail

Phone Number

COMPANY INFORMATION

Name of Business/Company

Phone Number

Company Address

City

State

Zip

Company Manager's Name

Manager's E-Mail Address

Manager's Phone Number

Describe in detail the type and brand name of the merchandise or services for sale:

List the last 3 locations where you have worked as a peddler, solicitor, or transient merchant.

1. _____ 2. _____ 3. _____

Have you ever had a business license denied or revoked by any government entity? Yes No
If yes, indicate the date or denial/revocation, government agency, and reason for denial/revocation:

VEHICLE INFORMATION

Year

Make

Model

Color

License Plate Number

Last 6 digits of VIN

Year

Make

Model

Color

License Plate Number

Last 6 digits of VIN

Year

Make

Model

Color

License Plate Number

Last 6 digits of VIN

DATES and LOCATION INTENDING TO CONDUCT BUSINESS

Annual or Daily License Annual Daily

Start Date End Date If applying for a daily license, a maximum of 14 consecutive days is permitted.

Location as to Where Business Will be conducted Phone number while conducting business

BACKGROUND CHECK

Have you ever been convicted of a felony gross misdemeanor, misdemeanor, or ordinance violation for violating any federal, state, or local ordinances other than a minor traffic offense within the last ten years?

Yes No N/A – Solicitors

The Minnesota Data Practices Act requires that you be advised of the following information:

As an applicant for a Peddler License, you are asked to provide private and/or confidential information about yourself that will be used to check driving history, criminal history, arrest records, warrant information, and other relevant records. You may refuse to provide this information. However, should you refuse, our investigation cannot be completed and will result in your application not being processed. With the exception of your Social Security Number, the information you provide is public and will be used by the Meeker County Sheriff’s Office, the Watkins City Council, and/or the general public. This AUTHORIZATION FOR RELEASE OF INFORMATION will expire two years from the date you sign it.

I have read and understand the above Data Practices Advisory.

Signature: _____ Date: _____

CONSENT

The data you furnish on the application will be used by the City of Watkins to assess your qualifications for licensure. Disclosure of the information is voluntary. You are not legally required to provide this data; however, if you fail to do so, the City of Watkins may be unable to process this application. Disclosure of your Minnesota Tax ID Number, Social Security Number, or Individual Tax ID Number is required by Minnesota Statutes 270C.72, and your Social Security Number may be requested by and released to the Minnesota Commissioner of Revenue. After submission, all information pursuant to Minnesota Statutes, Chapter 13.

A SIGNATURE IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION

I, (print name) _____, certify or declare under penalty of perjury, under the laws of the State of Minnesota, that the foregoing is true and correct. All information given is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension, or revocation of my business license.

Signature: _____ Date: _____