

# **Peddler-Solicitors & Transient Merchants Application**

242 Fredonia Ave PO Box 159 Fredonia, Wisconsin 53021 (262) 692-9125 https://www.fredoniawi.gov/

Fee: \$18.00 Primary Applicant Fee, plus \$2.00 CIB Investigation Fee. Each assistant shall also be required to pay CIB.

There will be a five day waiting period for the Village Marshal to complete the investigation process.

License valid for a period of thirty days or twelve months from issuance, dpending on fees, subject to subsequent refusal as provided in Sec. 7-4-5 (b)

### **Applicant's Information**

Name:						
Driver's License Number:						
Height, Weight, Color of Hair and Eyes:						
Date of Birth:						
Permanent Address:						
Temporary Address:						
Phone Number:						
Email:						
Employer's Information						
Employer's Name:						
Employer's Address:						
Employer's Phone Number:						
Length of Service with Employer:						
Description of Activities						
Describe the nature of business to be conducted, merchandise offered, and method of delivery:						
Make, model, licence plate number, and color of vehicle being used:						
Last three cities, villages, or towns of operation:						
Address and phone number where Applicant may be reached for at least seven days after leaving this village:						
Have you ever been convicted of any crime or ordinance violation within the last five years? Yes No If yes, please explain the nature of the offense:						
Length of time necessary to complete work in the Village:						
Hours of the day you will be working in the Village:						

SEE REVERSE FOR ADDITIONAL INFORMATION.

#### Please provide with your application:

- Valid Driver's License or some other proof of identity as may reasonably be required.
- A state certificate of examination and approval from the sealer of weights and measures where applicant's business requires use of weighting and measuring devices approved by state authority.
- A state health officer's certificate where applicant's business involves the handling of food or clothing and is required to be certified under state law. Such certificate is to state that the applicant's apparently free from any contagious or infectious disease, dated not more than 90 days prior to the date the application for registration is made.

#### Registration:

- Every member of the applicant's group must fill out a separate registration form. The primary applicant will pay the registration fee plus CIB investigation fee. Each assistant under the application must pay the CIB fee.
- Solicitors of funds or donations of funds for charitable or other organizations shall comply with all
  disclosure and registration requirements but are exempt from paying the registration fee. Such
  applicants shall pay the CIB fee.

## Please read carefully:

I declare under penalty of perjury that all of the above information is true and correct to the best of my knowledge and belief. I acknowledge that I have read and understand the rules and regulations pertaining to the conduct of transient merchants and solicitors in the Village of Fredonia. I further agree to appoint the Village Clerk as my agent to accept service or process in any civil action brought against me arising out of any sale, service performed or solicitation by me in connection with the direct sales or solicitation activities in the event I cannot, after reasonable effort, be served personally. I voluntarily grant the Village of Fredonia the right to investigate the statements I have made in this application. I understand the Village of Fredonia will be doing a background check on each applicant pursuant to Chapter 514 of the Village's Code of Ordinances.

Applicant Signature:				Date:	
Village Marshal Signat	ure:			Date:	
Date Received:		Check Number:			
Date Issued:			Date of Expiration:		