

CITY OF DE PERE

☐ **SOLICITOR PERMIT APPLICATION** (Door-to-Door)

Permit Fee: **\$100/person/mo**

☐ **DIRECT SELLER PERMIT APPLICATION** (Temporary permanent location such as parking lot or ice cream trucks)

Permit Fee: **\$100/person/mo OR \$350/person/yr**

PLUS Non-refundable Processing Fee: \$20.00

Total Fee: \$

Part A - APPLICATION INSTRUCTIONS: File this completed application and the required fee with the Clerk-Treasurer, 335 S. Broadway, De Pere, WI 54115. Answer all questions completely. Use an additional sheet of paper if you cannot answer a question within the space provided.

Part B - TO BE COMPLETED BY APPLICANT

1.	Name of Company or Organization:		
	Phone Number:		
2.	Full Name of Person in Charge of Sale:		
	First:	Middle:	Last:
3.	Applicant Name:		
	First:	Middle:	Last:
4.	Applicant Permanent Address:		
	Street Address:		
	City, State, Zip:		
5.	Local Address:		
	Street Address:		
	City, State, Zip:		
6.	Driver's License or ID Number:		
7.	State of Issuance:	8.	Date of Birth:
9.	Sex:	10.	Race:
11.	Place Last Attended High School:		
12.	List the last three communities where this business was conducted:		
13.	Vehicle(s) to be used and license number(s):		
14.	Have you been convicted of any felony, misdemeanor, ordinance violation (other than minor traffic violations) in the last five years. (IF YES, supply dates and convictions:		

15.	List all employees or persons engaged in this activity: (Full Name, Address and Date of Birth):
16.	List two local references: Name, Address & Phone No.: Name Address & Phone No.:
17.	Describe all items to be sold, the quantity to be sold, the retail price of each item, and the location, time and date(s) of the direct sales activity.
Items to be Sold:	
Selling Times:	

Part C - TO BE COMPLETED AT THE CITY CLERK'S OFFICE

READ CAREFULLY BEFORE SIGNING. The undersigned, being duly sworn, states that each of the above questions has been truthfully answered to the best of my knowledge. I understand that any activity engaged in is limited to the time, date, location and inventory representations made on this application and by the provisions of Chapter 114 De Pere Municipal Code. I hereby designate the City Clerk-Treasurer for the City of De Pere as my agent for the purposes of accepting service in any civil action arising out of or in conjunction with the use of this license.

Subscribed and sworn to before me this _____ day of _____, _____.

Clerk/Notary Public: _____

My Commission expires: _____

Applicant Signature: _____ Date: _____

D - FOR CITY USE ONLY

Police Department Recommendation is based upon information received from police organizations willing to submit criminal history background information for license checks.

☐ No information received upon which to recommend denial of license.

☐ Denial (reasons): _____

Police Chief Signature: _____

Clerk-Treasurer Signature: _____

Rec.# _____

Date: _____