

11333 N. Cedarburg Rd

Mequon, WI 53092

Phone: 262/236-2914

Fax: 262/242-9655

**www.ci.mequon.wi.us Office of the City Clerk**

**Peddler, Canvasser, Solicitor or Transient Merchant**

**License Application**

|  |  |
| --- | --- |
| **LICENSE REQUESTED** | |
| Type  Company peddler, canvasser, solicitor, trans. merchant | Fee  $100 NEW FEE |
| **PLUS**  \_\_\_\_ x **$15** for ea. person | $ |
| **TOTAL FEE** | $ |

|  |  |
| --- | --- |
| 456- | - |
| Applicant’s Wisconsin Seller’s Permit Number (15 digits) | Federal Employer ID Number (FEIN) (9 digits) |

**\*\*\*ATTACH A COPY OF THE WISCONSIN SELLER”S PERMIT (if applicable)\*\*\***

**Please print clearly**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant** Name: |  | | | | | | |
|  | Last, First, Full Middle Name | | | | | | |
| Home Address: |  | | | | | | |
| City, State, Zip: |  | | | | | | |
| Phone: |  | | | | | | |
| Birthdate: |  | | | | | | |
| Social Security #: |  | | | | | | |
| Physical Description: | Height: | | Weight: | | | | |
| Driver’s License #: |  | | | | State: |  | |
| Motor Vehicle: |  |  | |  |  | |  |
| Make | Model | | Year | Color | | License # |

|  |  |  |
| --- | --- | --- |
| **Employer** Name: |  | |
| Business Address: |  | |
| City, State, Zip: |  | |
| Business Phone: |  | |
|  |  | |
| Local address from which business will be conducted: | |  |
|  | | |

|  |  |
| --- | --- |
| Nature of business and articles or services promoted: |  |
|  | |
|  | |

|  |
| --- |
| Specify articles, services and price of articles of services to be solicited or sold within the corporate limits of the City of Mequon: |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| Dates during which business will be conducted: (starts after committee approval) | / / to / / |
|  | Month Day Year Month Day Year |

**I CERTIFY THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

Applicant Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Statement of Chief of Police**:

 I have caused the applicant and the facts stated in this application to be investigated and I **APPROVE** the granting of the license.

 I have caused the applicant and the facts stated in this application to be investigated and I **DISAPPROVE** the granting of the license for the following reason(s). Attach additional sheet if needed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Chief of Police Date

**TO BE COMPLETED BY CLERK:**

|  |  |  |
| --- | --- | --- |
| Date filed with Clerk | Approval date: | Effective Period: |
| Initials of Clerk: | Date license issued: | License # issued:  **PCS-** |
| Date extension requested: | Date extension approved: | New effective period: |

 11333 N. Cedarburg Rd

Mequon, WI 53092-1930

Phone: 262/236-2911

Fax: 262/242-9655

[**www.ci.mequon.wi.us**](http://www.ci.mequon.wi.us) **Office of the City Clerk**

The following restrictions apply:

• No soliciting before 9:00 AM nor after 7:00 PM.

* No parking on any city streets.
* No trespassing on any property posted “no soliciting” or “no trespassing”.
* No calling at the rear door of any residence.
* No soliciting on Sundays.
* Your license must be carried with you at all times.
* A photo ID issued by your company must be visible at all times.

One free 3-month extension is possible. The licensee may make application in person to the Clerk for renewal of the license. The Clerk shall grant the requested renewal and the renewed license shall remain in effect, only providing: a) At the time of request for renewal the licensee shall execute and provide a certified statement attesting that the information in the initial application and license is current, and correct, and to the extent applicable shall provide the Clerk with changes to any information which was provided in the initial application; b) There have been no bona fide citizen complaints regarding the peddling, canvassing, soliciting, or selling activities of the applicant or the applicant’s agents, employees, or affiliates, and c) There has been no objection to the renewal by the Finance-Personnel Committee of the city. We suggest applying for an extension no later than 10 calendar days prior to your license expiration date.

The regulation of Transient Merchants, Peddlers and Solicitors is regulated by the City of Mequon Section 14-114 of the Municipal Code. Transient Merchants, Peddlers and Solicitors are responsible for adhering to all requirements of the code. Feel free to contact the City Clerk’s Office at 262-236-2914 or [kandrykowski@ci.mequon.wi.us](mailto:kandrykowski@ci.mequon.wi.us) with any questions.

G:\Licensing\Peddlar License Restrictions.docx