

City of Wisconsin Dells

Application for: PEDDLER/SOLICITOR

Dates Requested: _____ To: _____ FEE \$175.00 Receipt No. _____

Name of Applicant: _____ Date of Birth: _____

Address of Applicant: _____

Driver's License Number: _____ State: _____

Name of Company: _____

Address of Company: _____

Daytime Telephone Number: (____) _____ Cell Phone: _____

Description of Business: _____

Source of Supply of Goods Proposed to be Sold: _____

Have you been convicted of any crime, misdemeanor, or violation of any municipal ordinance other than traffic violations?

If so, please list: _____

List the last 3 cities or villages where you last conducted the same type of business: _____

* A recent photograph (2" x 2") of the applicant must be attached.

* A copy of the applicant's or business' Wisconsin Seller's Permit must be attached.

Signature of Applicant

Subject to compliance with Wisconsin Dells Municipal Code sec. 16.09

Date Approved: _____ day of _____ 20____

Date Denied: _____ Reason(s): _____