



# Application for Direct Seller's License

License Fee: \$25.00

Sheriff's Department background check is required. No board approval required.

APPLICANT INFORMATION					
Last Name		First Name		Middle Name	
DOB	Race		Sex		
Height	Weight	Eye Color	Hair Color		
Home Address					
Phone		Email			
Temporary Address, if applicable					
Have you been convicted of any crime or ordinance violation related to your transient business or solicitation within the last 5 years?				Yes	No
If yes, please describe the nature of the offense and the place of conviction		<div><div></div><div></div></div>			

Vehicles used by the applicant of firm in the conduct of business			
Make	Model	Color	License No & State
Make	Model	Color	License No & State

BUSINESS INFORMATION	
Representing person, firm or corporation	
Address	
Phone	
Nature of business or solicitation	
Description of goods or services offered	
Proposed method of delivery of goods	

Last 3 cities/towns/villages where applicant has conducted business	1	<div></div>
	2	<div></div>
	3	<div></div>

I certify that all information given in this application is true to the best of my knowledge and consent to a background check by the Racine County Sheriff's Department.

\_\_\_\_\_  
Applicant's Signature

For office Use:

\$25 fee paid	
Sent to Sheriffs Dept	
Issued	