



171 Cossairt Avenue West  
PO Box 25  
Eden Valley, MN 55329  
(320) 453-5251 TDD# 711  
Fax (320) 453-5871  
Email: canderson@edenvalleymn.city  
Website: www.ci.edenvalley.mn.us

## LICENSE APPLICATION FOR TRANSIENT MERCHANTS, PEDDLERS, AND SOLICITORS

Name of Firm or Agency: \_\_\_\_\_

MN Sales Tax# \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**License Fees:**

10 day permit within a 12 month period: \$50  
30 day permit within a 12 month period: \$100  
90 day permit within a 12 month period: \$150

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name(s) Person(s) selling: (PLEASE PRINT) EACH applicant needs to fill out an Informed Consent

**Applicant 1:** Please list on back if more space is needed

Name: \_\_\_\_\_  
First Middle Last

Driver's License Number:

Date of Birth:

Vehicle Information: License Plate \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Place of Residence for the last 5 years:

Address: \_\_\_\_\_  
\_\_\_\_\_  
Dates at this address: \_\_\_\_\_  
\_\_\_\_\_

**Applicant 2:** Please list on back if more space is needed

Name: \_\_\_\_\_  
First Middle Last

Driver's License Number:

Date of Birth:

Vehicle Information: License Plate \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Place of Residence for the last 5 years:

Address: \_\_\_\_\_  
\_\_\_\_\_  
Dates at this address: \_\_\_\_\_  
\_\_\_\_\_



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Applicant 3: Please list on back if more space is needed

Name: \_\_\_\_\_  
First Middle Last

Driver's License Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Vehicle Information: License Plate \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Place of Residence for the last 5 years:

Address: \_\_\_\_\_ Dates at this address: \_\_\_\_\_

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

Attach a separate page for additional applicants if necessary

Type of product/service selling: \_\_\_\_\_

List date(s) selling to be conducted: From: \_\_\_\_\_ to: \_\_\_\_\_

Present place of business along with address and phone number:

\_\_\_\_\_

All applicants and/or salespeople MUST complete the attached Criminal Background Check Consent Form and include a copy of current diverse license or passport. License will be issued/denied within 10 (10) days of receipt of complete application information including fee. ALL INFORMATION PROVIDED HEREIN IS TRUE TO THE BEST OF MY KNOWLEDGE:

Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

City Clerk/Adm. Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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### Informed Consent

City of Eden Valley  
171 Cossairt Ave W  
Eden Valley, MN 55329  
320.453.5251

The following named individual has made an application with this agency for consideration for a peddlers/solicitor's permit.

**Last Name of Applicant** (please print): \_\_\_\_\_

**First Name** (please print): \_\_\_\_\_

**Middle** (full) (please print): \_\_\_\_\_

**Maiden, Alias or Former** (please print): \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Sex** (M or F): \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_  
(Month/Day/Year)

**Driver's License Number:** \_\_\_\_\_ (include a copy)

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information pursuant to Minnesota State Statutes §299F.035 to City of Eden Valley for the purpose of consideration for a peddlers/solicitors permit with this agency.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

TO BE SIGNED IN FRONT OF NOTARY. This release is valid for one year from the date of my signature.

Notary:

STATE OF MN, COUNTY OF \_\_\_\_\_

Signed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Signature

My Commission Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

1. Records obtained under the Minnesota State Statutes §299F.035 may be used solely for the purpose requested and cannot be disseminated outside the receiving departments, related agencies, or other authorized entities.
2. Your fingerprints may be used to check the criminal history records of the FBI.
3. You may challenge the accuracy and completeness of any information contained in the report provided (procedures are set forth in Minnesota Statutes §13.04 and Title 28 CFR Section 16.34)