

**DIRECT SELLERS
APPLICATION FOR LICENSE
VILLAGE OF SOMERSET**

Submit Application to: *Felicia Germain, Village Clerk
Village of Somerset
PO Box 356
Somerset, WI 54025*

NAME _____, _____, _____
(Last) (First) (Middle)

ADDRESS _____

Birth Date _____ **Height** _____ **Weight** _____
Hair Color _____ **Eye Color** _____

FIRM NAME _____

FIRM ADDRESS _____
Street City State ZIP

FIRM TELEPHONE NUMBER _____

FIRM TEMPORARY ADDRESS (if any) _____

Nature of Business to be conducted _____

Brief Description of Goods or Services to be offered _____

Description of area where business will be conducted _____

Proposed method of delivery of Goods _____

(Any Vehicle used by applicant in conduct of his/her business)

VEHICLE _____
License Make / Model Color

Cities, Villages, or Towns where applicant has conducted similar business (not to exceed three)

Location at which APPLICANT may be contacted for a minimum of seven days after leaving the Village of Somerset _____

Has APPLICANT been convicted of any crime or ordinance violation related to APPLICANT'S transient merchant business within the last FIVE years? _____
State Nature of Offense and Location of Conviction _____

I swear that the above information is correct _____
APPLICANT SIGNATURE DATE

POLICE CHIEF RECOMMENDATION _____

POLICE CHIEF SIGNATURE _____ **DATE** _____

**\$13.00 INVESTIGATION FEE MUST ACCOMPANY APPLICATION
\$20.00 LICENSE FEE**