



**Solicitors, Peddlers, Transient Merchants  
Certificate of Registration Application Form**

\$35.00 Background Check	\$30.00 Per Week Permit Fee	\$65.00 Per Month Permit Fee
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**Business Information**

**Applicant's Full Legal Name** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

**Permanent Address** \_\_\_\_\_

**Address of Employer** \_\_\_\_\_

**Business Phone Number** \_\_\_\_\_

**Fax Number** \_\_\_\_\_

**Email** \_\_\_\_\_

List of municipalities wherein the applicant/company has worked in before coming to the City of Dayton:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Describe the Nature of Your Business

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

Description of Goods to be sold \_\_\_\_\_

Address where goods are manufactured \_\_\_\_\_

License Number \_\_\_\_\_ State ID \_\_\_\_\_

Address where goods are stored \_\_\_\_\_

Manner of which the goods shall be delivered to customer \_\_\_\_\_

Requested dates for working within the City of Dayton \_\_\_\_\_

Other Requirements:

- A photograph of the applicant taken within 60 days immediately prior to the date of filing the application. The picture shall be approximately two inches by two inches showing the head and shoulders of the applicant in a clear and distinguishing manner.
- The applicant is subject to a background check that will be completed by the Dayton Police Department.
- If the City approves the permit request, the following requirement must be met by the permit holder at all times:
  - Must have a City Provided Permit in his/her possession at all times while working in the City of Dayton
  - If applicable, a copy of the permit holder's sales tax permit must be posted at the work site.
  - Proof that the transient merchant sales are permitted within the zoning district where business will be conducted.

Transient Merchants must also provide the following information:

- Proof of appropriate permission to operate on the proposed site.
- A copy of your individual sales tax permit. The sales tax permit must be posted at the site.
- Proof that the transient merchant sales are permitted within the zoning district where the proposed business will be conducted.

License Number \_\_\_\_\_ State ID \_\_\_\_\_

## **Applicant Information**

Full Legal Name of Each Solicitor: \_\_\_\_\_

Known Aliases: \_\_\_\_\_

Has applicant ever been convicted of any crime?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of vehicle which the applicant will use while engaged in the business of a peddler or solicitor within the City of Dayton:

Year \_\_\_\_\_

Make \_\_\_\_\_

Model \_\_\_\_\_

Color \_\_\_\_\_

I hereby authorize and grant my informed consent to permit you to release to and make available to the City of Dayton, Minnesota, and/or its agents and/or representatives data classified as private which concerns me and which may be in your possession. The data which I authorize to be released consists of private data as defined by Minnesota Statute 13.02, Subd. 12, and has been collected by you as a result of my contacts and associations with you and/or your representatives. The information for which release is authorized includes all data which has been collected, created, received, retained, or disseminated in whatever form which in any way relates to my dealings with you or your agency. I understand that the purpose of permitting the City of Dayton to have access to this information is to determine my suitability for solicitation within the City. I further understand that this information may subsequently be utilized for other purposes relating to solicitation within the City.

By signing this authorization, I hereby release the Bureau of Criminal Apprehension from any and all liability which otherwise may or does accrue as a result of the release of any and all data, regardless of its accuracy. I also release the City of Dayton from any and all liability for its receipt and use of data received pursuant to this consent. This authorization shall be valid for a period of one year, but I reserve the right to, at any time prior to that expiration, cancel the written authorization by providing written notice to the City of Dayton or to you of that fact.

**Name of Applicant** (*print full name*) \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_

**Date** \_\_\_\_\_