



CITY OF ALLEGAN

APPLICATION FOR PEDDLER/SOLICITOR LICENSE

☐ Copy of Drivers License for each peddler/solicitor attached Non-Refundable Application Fee \$25.00 \_\_\_\_\_ ☐ Copy of Vehicle registration for each vehicle to be used \_\_\_\_\_ Application Approved \_\_\_\_\_

Disapproved \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Organization/Corporation \_\_\_\_\_

Address \_\_\_\_\_ City, State & Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail address \_\_\_\_\_

Agent for Service \_\_\_\_\_ Registered – Where? \_\_\_\_\_

NON-PROFIT – State or Federal I.D. Number \_\_\_\_\_

Purpose of the Organization \_\_\_\_\_

Charitable Organization \_\_\_ Yes \_\_\_ No Proceeds for what purpose? \_\_\_\_\_

List items to be offered for sale \_\_\_\_\_

Location to be used \_\_\_\_\_

How will food be transported? \_\_\_\_\_

If food, attach Michigan Health Department Certification \_\_\_\_\_

Requesting license for the following date(s) (list all) \_\_\_\_\_ 20\_\_\_\_ Hours of operation (list all) \_\_\_\_\_

Names, addresses and telephone numbers of all solicitors' acting on the applicant's behalf: \_\_\_\_\_

Please list additional names on back of form

Identification must be provided to all workers and produced upon request.

Advance sale \_\_\_ Yes \_\_\_ No If yes, what is the delivery date? \_\_\_\_\_

List vehicles used for sale or delivery: Description \_\_\_\_\_ Make \_\_\_\_\_

License Plate Number \_\_\_\_\_

I hereby certify that the information given herein is true, List others on back of form.

and that I have never been convicted of a felony, misdemeanor, or violation of any local ordinance

except \_\_\_\_\_ and that punishment \_\_\_\_\_ therefore consisted of \_\_\_\_\_

Authorized City Official

Signature \_\_\_\_\_

Chief of Police \_\_\_\_\_

Title if signing for a corporation \_\_\_\_\_

City Manager/Clerk \_\_\_\_\_

(THE APPLICATN IS RESPONSIBLE FOR OBTAINING ALL OTHER LOCAL, STATE AND FEDERAL APPROVALS RELATED TO THIS PERMIT. THIS INCLUDES OBTAINING COUNTY HEALTH DEPARTMENT, AS WELL AS USDA FOOD PERMITS).

(Revised 2020-4-1)