

APPLICATION FOR PEDDLERS LICENSE

The undersigned hereby makes application for a peddler’s license pursuant to the City of Kingsford Code of Ordinances Section 28-3 and being duly sworn under oath states:

Name _____ Age _____

Phone Number _____ Email _____

Residence _____

Purpose of License _____

Company Name _____ Company Phone No. _____

Choose one: Independent Contractor Company Owner

Date(s) requested _____

Mode of Transportation _____

Vehicle Make & Model _____ License Plate No. _____

Driver’s License No. _____

Other Identification _____

Will there be additional people assisting the applicant? (Please list names and supply copy of driver’s license.)

Nature of article(s) to be sold or offered for sale:

How are these articles to be sold (by width, measure, package, etc.)

Peddlers license number, if any, from any municipality other than the City of Kingsford

Peddlers license number, if any, from the state _____

If a license is issued to me, I agree to abide by the City of Kingsford Code of Ordinances Section 28 and all other laws regulating or pertaining to the business which I propose to engage. I understand that the City is relying on the statements contained herein and certify that the statements are true and accurate.

Applicant’s Signature Date