

## Application for Peddler License

A Peddler is a person who goes from house-to-house, door-to-door, business-to-business, street-to-street, or any other type of place-to-place, for the purpose of offering for sale, displaying or exposing for sale, selling or attempting to sell, and delivering immediately upon sale, the goods, wares, products, merchandise or other personnel property that the person is carrying or otherwise transporting.

The undersigned hereby makes application for a Peddler's License under the provisions of the City of Cambridge Code of Ordinances, Title XI, Chapter 112 and submits the following facts in support thereof. Per City Code §112.03, applications shall be made at least 14 regular business days before the applicant desires to begin conducting business.

Requested Length of Time for Permit:     Annual                       Per Week (2 weeks max)     Per Day  
\$200    \$50    \$25

Requested Date(s) for Permit: \_\_\_\_\_

### Applicant Information – Must Print Legible

Applicant's Full First Name:	Applicant's Full Middle Name:	Applicant's Full Last Name:
Date of Birth:	Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
All other names which applicant officially answers:		
Full Address of Permanent Residence: _____ _____		
Full Address of Applicant's Regular Place of Business (if any) _____ _____		
Home Telephone	Work Telephone	Cell Phone
E-mail address:		
Driver's License Number: _____		State Issued: _____
Physical description of the applicant (hair color, eye color, height, weight, distinguishing marks and/or features, and the like:		
Applicant's Signature:		

Describe the type of businesses: \_\_\_\_\_

\_\_\_\_\_

General merchandise to be sold: \_\_\_\_\_

\_\_\_\_\_

Location of business: \_\_\_\_\_

Property owner/agent name (print): \_\_\_\_\_

Property owner/agent telephone number: \_\_\_\_\_

Property owner/agent signature of permission: \_\_\_\_\_

Hours of operation: \_\_\_\_\_

Days of operation: \_\_\_\_\_

Description of vehicle(s) (if applicable) to be used with the business: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Names/information for people associated with you in this business**

First Name:	Middle Name:	Last Name:
Date of Birth:	Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Full Address: _____ _____		
Home Telephone	Work Telephone	Cell Phone
E-mail address:		
Driver's License Number: _____	State Issued: _____	
Applicant's Signature:		

First Name:	Middle Name:	Last Name:
Date of Birth:	Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Full Address: _____ _____		
Home Telephone	Work Telephone	Cell Phone
E-mail address:		
Driver's License Number: _____		State Issued: _____
Applicant's Signature:		

Other communities where you have registered for a peddler's / transient merchant permit (at least three of the most recent):

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Have you ever been denied a peddler's / transient merchant permit in another municipality?

Yes       No      If yes, why? \_\_\_\_\_

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Have you ever been convicted within the last five years of any felony, gross misdemeanor, or misdemeanor for violation of any state or federal statute or any local ordinance, other than traffic offenses?  Yes  No

All peddlers / transient merchant's permit requires a background check to be completed prior to the permit being issued. A background check can take up to ten business days.

**Informed Consent for Background Investigation for Permit Application**  
(A separate form must be filled out for each applicant, officer, and/or partner)

Please supply your driver's license so we may copy it for the background check. The following named individual has made application with this the City of Cambridge for a peddler's Permit or transient merchant license. In order to determine if the applicant is eligible to receive the license, a criminal history check must be conducted. The information provided below is to assist the BCA's investigation.

**PLEASE PRINT LEGIBLY**

<b>Last Name of Applicant</b>	<b>First Name (full name please)</b>	<b>Middle Name (full name)</b>	
<b>Any Maiden, Alias or Former Name(s)</b>			
<b>Date of Birth (MM/DD/YYYY)</b>	<b>Sex</b>	<b>Race</b>	

I, \_\_\_\_\_, authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to the City of Cambridge and the Cambridge Police Department for the purpose of conducting a criminal background check for determining eligibility for a peddler's permit or transient merchant license.

The authorization shall expire one year from the date of my signature.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

STATE OF MINNESOTA )  
COUNTY OF ISANTI )

BEFORE ME, the undersigned authority, on this day personally appeared \_\_\_\_\_ known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND and seal of office this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary's signature

\_\_\_\_\_  
Date