

For office use only

Application date _____ Photo number _____ Picked up _____
 Photo date _____ Mailed _____ Called _____

Section 1: Applicant

To be completed by applicant only.

1. Name _____ Phone (_____) _____
Last First Full middle Maiden name

Home address _____
Street City County State Zip

Local address _____
Street City County State Zip

2. Height _____ Weight _____ Color of hair _____ Color of eyes _____

3. Place of birth _____ Date of birth _____

4. Business name _____ Phone (_____) _____

Address _____
Street City County State Zip

Applicant's relationship to business _____

Name of supervising manager _____ Local phone (_____) _____
Last First Full middle Maiden name

Local address _____
Street City County State Zip

5. What is the supply source of merchandise to be sold? _____

6. Where are the goods located at this time? _____

7. What is the proposed method of delivery for goods sold in Bloomington? _____

8. Describe the proposed solicitation and merchandise or service involved. _____

9. Do you drive a vehicle in connection with this work? *If yes, describe the vehicle.* Yes No

Color _____ Make _____ Model _____ Year _____ State license plate number _____

10. Do you have a valid driver's license? Yes No

If yes: Driver's license number _____ State _____ *If no:* ID card number _____ State _____

11. List last five cities or other localities where applicant conducted solicitation immediately preceding the date of application.

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12. Dates and hours during which solicitation will be conducted. *Cannot exceed six months nor be conducted between 9 p.m. and 9 a.m.*

12. Are you a U.S. citizen? *If yes, but birthplace was not in the U.S., please provide a Certificate of Naturalization, Certificate of Citizenship, or current passport. If no, present proof of immigration/employment status.* Yes No

14. Have you or the firm or business employing you been the subject of an investigation by a consumer protection agency or state attorney general office? *If yes, provide the dates and outcome of such investigation.* Yes No

15. Have you had a registration, license and/or identification card for solicitation denied or revoked by the City or any other government body within three years before the application date? *If yes, provide the details and locations.* Yes No

16. Have you ever been convicted of any felony, crime or violation of any ordinance other than a minor traffic offense? *If yes, provide the time, place, offense and penalty imposed.* Yes No

Notice

Note: A photo ID card will be issued to each licensed solicitor.
All applicants **must apply in person** at the Licensing Section so that an ID photo can be taken.

The data on this form will be used to approve your license. Some requested data is private. Private data is available to you and the City or State staff who need this information to perform their duties, but is not available to the public. You are not legally required to provide this data, but the City may not be able to approve your license if you do not provide it.

I have received from the City of Bloomington a copy of the city ordinance relating to solicitors, and I will familiarize myself with its provisions. I understand that a criminal conviction will not bar me from obtaining a license unless the conviction is directly related to the occupation for which the license is sought and there is no showing of sufficient rehabilitation and present fitness to perform the duties of the occupation (*Minnesota Statute 364.03*). I understand that falsification of the application, including failure to reveal a criminal conviction, constitutes grounds for denial of the license.

The information I have provided on this application is truthful. I authorize the City of Bloomington to investigate the information and contact persons/organizations named on this application.

X _____
Applicant signature