



111 Hassan Street Southeast
Hutchinson, MN 55350
(320) 587-5151/Fax: (320) 234-4240

City of Hutchinson
APPLICATION FOR PEDDLERS AND TRANSIENT MERCHANTS
(Under Ordinance No. 111)

Application Type (choose one)			
<input type="checkbox"/> Peddler <input type="checkbox"/> Transient Merchant	\$125.00 \$125.00	Date of Application: _____ License Period: <input type="checkbox"/> Expires on December 31 st of license year <input type="checkbox"/> Valid for the following dates: _____ to _____	
<input type="checkbox"/> Parade Peddler	\$ 30.00	Date of parade: _____	

Applicant Information	
<p>2" X 2" Picture Required</p> <div style="border: 1px solid black; width: 200px; height: 150px; margin: 0 auto; text-align: center; font-size: 100px; line-height: 1;">X</div>	<p>Name: _____</p> <p>Height: _____ Weight: _____ Eye Color: _____</p> <p>Driver's License Number: _____ State: _____</p> <p>Permanent Address: _____</p> <p style="text-align: center;">_____ <i>City</i> <i>State</i> <i>Zip</i></p> <p>Permanent Telephone: _____</p> <p>Temporary Address: _____</p> <p style="text-align: center;">_____ <i>City</i> <i>State</i> <i>Zip</i></p> <p>Temporary Telephone Access: _____</p> <p>Have you been convicted of any crime, misdemeanor, or violation of any municipal ordinance, other than traffic violations? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, state the nature of offense and punishment or penalty assessed therefore:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Location Information

Location Name (CANNOT OCCUPY PUBLIC RIGHT-OF-WAY)

Location Address

City

State

Zip

If the applicant is not the property owner, the property owner must sign below granting permission for use of said property:

Property owner signature

Property owner name

Business Information

Describe relationship between applicant and employer:

Describe nature of business and describe item(s) offered:

Describe method of delivery:

Describe source of supply:

Supplier Name

Supplier Phone Number

Supplier Address

City

State

Zip

Supplier Name

Supplier Phone Number

Supplier Address

City

State

Zip

Supplier Name

Supplier Phone Number

Supplier Address

City

State

Zip

Reference Information

Provide two (2) property owners (in McLeod County) for character references:

Property Owner Name

Property Owner Phone Number

Property Owner Address

City

State

Zip

Property Owner Name

Property Owner Phone Number

Property Owner Address

City

State

Zip

Reference Information (continued)

List last (up to three (3)) previous city(ies) where you carried on same activity (immediately preceding today's date):

_____	_____	_____ to _____
<i>City</i>	<i>State</i>	<i>Date(s) of Activity</i>
_____	_____	_____ to _____
<i>City</i>	<i>State</i>	<i>Date(s) of Activity</i>
_____	_____	_____ to _____
<i>City</i>	<i>State</i>	<i>Date(s) of Activity</i>

Checklist

The following items need to be completed and/or attached in order for the application to be processed:

Application/Investigation fee paid in full (check or money order): ☐ yes ☐ no

Application completed in full and signed: ☐ yes ☐ no

I hereby certify I have completely filled out the entire above application and that the application is true, correct, and accurate. I fully understand that any person who violates any provision of the Peddlers, Solicitors, and Transient Merchants Ordinance Chapter 111 is guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not exceeding \$1,000.00 or by imprisonment for a period not exceeding 90 days or both, plus, in either case, the costs of prosecution.

Applicant's Signature

Date

Internal Use Only

Police ☐ approved ☐ denied Notes: _____

City Council ☐ approved ☐ denied Notes: _____

Release of Information Form

As an applicant for a permit from the City of Hutchinson, Minnesota, I am required to furnish information, which that agency may use in determining my moral, physical, mental, and financial qualifications. In this connection, I hereby expressly authorize release of any and all information, which you may have concerning me, including information of a confidential or privileged nature.

I hereby release the agency with which I am seeking an application for a permit, and any organization, company, or person furnishing information to that agency as expressly authorized above, from any liability for damage, which may result from furnishing the information requested.

Applicant's Information <i>(Please Print)</i>			
Name:	<div><div></div><div><i>First Name</i></div><div><i>Middle Name</i></div><div><i>Last Name</i></div></div>		
Address:	<div></div>		
	<div><div></div><div><i>City</i></div></div>	<div><div></div><div><i>County</i></div></div>	<div><div></div><div><i>State</i></div></div>
Date of Birth:	<div><div></div><div><i>Month</i></div></div>	<div><div></div><div><i>Day</i></div></div>	<div><div></div><div><i>Year</i></div></div>
Place of Birth:	<div><div></div><div><i>City</i></div></div>	<div><div></div><div><i>State</i></div></div>	
Social Security Number:	<div></div>		
Driver's License Number:	<div></div>		

*Please allow two weeks lead time for an investigation (this **does not** include time allowed for scheduling a public hearing if necessary, a publication notice and a City Council meeting).

<div></div> <div><i>Applicant's Signature</i></div>	<div></div> <div><i>Date</i></div>
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