



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"/> Annual Peddler/Transient Merchant	\$135.00	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"/> Temporary Peddler/Transient Merchant	\$ 30.00 – up to three consecutive days	Dates of sale: _____	

Applicant Information	
<p>2" X 2" Picture Required</p> <div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto; display: flex; align-items: center; justify-content: center; font-size: 48px; font-weight: bold;">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>

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>_____</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><i>City</i></div> <div><i>County</i></div> <div><i>State</i></div> <div><i>Zip</i></div>		
Date of Birth:	<div><div>_____</div><div>_____</div><div>_____</div><div><i>Month</i></div><div><i>Day</i></div><div><i>Year</i></div></div>		
Place of Birth:	<div><div>_____</div><div>_____</div><div><i>City</i></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).

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