

Application for Solicitors License (Sellers Permit)

Village of Spring Green
154 N. Lexington Street
PO Box 158
Spring Green, WI 53588
608/588.2335
608/588.3808 – fax

APPLICANT NAME & ADDRESS:

Full Name _____

Permanent Address _____

Telephone _____

Temporary Address _____

SELLER INFORMATION:

Date of Birth _____

Height _____ Weight _____

Color of Hair _____ Color of Eyes _____

Wisconsin Drivers License Number _____

FIRM, ASSOCIATION OR CORPORATION THAT THE TRANSIENT MERCHANT REPRESENTS:

Name _____

Address _____

Telephone _____

TEMPORARY ADDRESS AND TELEPHONE OF BUSINESS

Address _____

Telephone _____

NATURE OF BUSINESS AND BRIEF DESCRIPTION OF MERCHANDISE OR SERVICES OFFERED:

PROPOSED METHOD OF DELIVERY OF MERCHANDISE (IF APPLICABLE):

VEHICLE INFORMATION:

Make _____

Model _____

License Plate Number _____

Color _____

MOST RECENT CITIES, VILLAGES AND TOWNS WHERE APPLICANT CONDUCTED BUSINESS:

LIST TWO (2) CHARACTER REFERENCES WHO ARE RESIDENTS OF WISCONSIN AND WHO WILL CERTIFY AS TO THE APPLICANTS GOOD CHARACTER & BUSINESS RESPONSIBILITY:

PLACE WHERE APPLICANT CAN BE CONTACTED FOR AT LEAST SEVEN DAYS AFTER LEAVING VILLAGE:

Statement as to whether applicant has been convicted of any crime or ordinance violation related to applicant's transient merchant business within the last five years and the nature of the offense and the place of conviction:

At the time the registration is returned, a fee of \$100.00 shall be paid to the clerk to cover the cost of processing said registration. Please attach any advertisements that will be distributed in connection with intended solicitation and sales.

The applicant shall sign a statement appointing the clerk his/her agent to accept service of process in any civil action brought against the applicant arising out of any sale or service performed by the applicant arising out of any sale or service performed by the applicant in connection with the direct sales activities of the applicant, in the event the applicant cannot, after reasonable effort, be served personally.

Applicant Signature _____

Date _____

This license shall be good for one year from the date of issue (Date of Village Board Approval).

Signed _____

Date _____