## APPLICATION FOR LICENSE PEDDLER/SOLICITOR CITY OF MAQUOKETA, IOWA

(License will be issued/denied within 5 working days)

NAMI	Ξ:		
ADDF	RESS:		
CITY:		TELEPHONE:	
I.	Genera 1.	al Information Employer:	
		Address:	
	2.	Incorporated Under Laws of State of:	
	3.	Nature of Business:	
	4.	Location of Business Activity:	
	5.	Description of Service Sold:	
	6.	Condition of Goods ( ) new or ( ) used	
	7.	Delivery of Goods ( ) immediate or ( ) future	
II.	PERSONAL INFORMATION		
	1.	Has the person having management or supervision of the applicant's business been convicted of a felony within the last five years?	
		( ) yes ( )no	
		If yes, state the nature of the offense and punishment:	
	2.	Has the person having management or supervision of the applicant's business been convicted of any violation of a law or ordinance relating to the nature of the business conducted by the applicant?	
		( )yes ( ) no	

If yes, state the nature of the offense and punishment: \_\_\_\_\_

3	3.	Has the applicant ever been denied a license under this ordinance? ( ) yes ( ) no
2	4.	Has the applicant ever had a license revoked under this ordinance? ( ) yes ( ) no
Ē	5.	List five references (previous cities where goods have been sold).
(	City	Contact Person Phone Number
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-		
-		
(	6.	List license numbers, State, year, color and model of vehicle for all vehicles used:
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7	7.	Has the applicant provided a copy of their driver's license? ( ) yes ( ) no
I. F	FEE PA	AID Has the applicant paid the fee of \$50.00 for the 30-day license? ( ) yes ( ) no Receipt #:
I	I HERE	BY CERTIFY that the above information is true and correct to the best of my

I HEREBY CERTIFY that the above information is true and correct to the best of my knowledge.

I HEREBY CERTIFY receipt of a copy of Title III, Community Protection; Chapter 7 Licensing and Regulating of Peddlers; of the Maquoketa City Code. I further certify that I have and I will continue to comply with the requirements and regulations of the Maquoketa City Code of Ordinances.

SIGNED this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_,

Signature of Applicant

\* \* \* \* \* \* \* \* \* \* \*

I HEREBY CERTIFY that the above applicant has complied with the provisions of Title III, Chapter 7, of the Maquoketa City Code of Ordinances. This application is hereby approved and accepted this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_.

CITY OF MAQUOKETA

City Manager

<u>Note:</u>

NO PERSON SHALL ENGAGE IN THE ACTIVITIES REGULATED UNDER THIS ORDINANCE FROM DOOR TO DOOR PRIOR TO 9:00 A.M. OR AFTER 6:00 P.M. OF ANY WEEKDAY OR SATURDAY. NO PERSON SHALL ENGAGE IN THE ACTIVITIES REGULATED UNDER THIS SECTION ANY TIME ON A SUNDAY OR ON A STATE OR NATIONAL HOLIDAY.