



**CITY OF WAHPETON**

1900 4<sup>th</sup> Street North · PO Box 490 · Wahpeton, ND 58074 · Phone 701-642-8448 · Fax 701-642-1428

**TRANSIENT MERCHANT, HAWKER, PEDDLER, SOLICITOR, AND CANVASSER LICENSE APPLICATION**

**Fee is \$15.00 per day or \$300.00 per year for Transient Merchant, Hawker, Peddler, Runner, Solicitor, and Canvasser Licenses.**

**A two (2) year Non-revocable \$1,000 Surety Bond payable to the City of Wahpeton**

**\*\*License expires on December 31<sup>st</sup> of the year in which license was granted.**

Application Type:  New  Renewal Permit Number: \_\_\_\_\_

**This license is for the following dates: \_\_\_\_\_, 20\_\_ to \_\_\_\_\_, 20\_\_.**

**License may not be sold, transferred or assigned except by the City Council.**

I/We do hereby apply for a City License to conduct the business of (circle one) Transient Merchant, Hawker, Peddler, Runner, Solicitor, Canvasser, whose business is \_\_\_\_\_

**Type of Product Being sold** (Inventory list to be attached.):  
 \_\_\_\_\_  
 \_\_\_\_\_

**Name, Date of Birth, Social Security No., and Sex of Individual Applicant(s)** (attach additional sheet if needed):  
 \_\_\_\_\_

**Name of Corporation, LLC, etc and State of Incorporation** (*Need to be registered with State of ND*):  
 \_\_\_\_\_

**Name of Business:**  
 \_\_\_\_\_

<b>Permanent Business Address (PO Box not acceptable) City</b>	<b>State</b>	<b>Zip</b>
_____	_____	_____

**Business Mailing Address (PO Box acceptable)**  
 \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Name and home address for the previous two years of the person(s) owning the business: (Attach sheet for additional owners)**

<b>OWNERS NAME, AGE, &amp; SEX</b>	<b>ADDRESS (City, State, Zip Code)</b>
_____	_____
_____	_____

**Name, Age, Sex, home address, and home and cell telephone number of each employee or agent who will engage in business activities in Wahpeton, ND, on behalf of your company: (Attach sheet for additional employees)**

<b>NAME</b>	<b>ADDRESS (City, State, Zip Code)</b>	<b>PHONE NO.</b>
_____	_____	_____
_____	_____	_____

Furnish a current photograph of **each** owner, agent, or employee who will be conducting business in Wahpeton, ND. The photographs will become a part of this application. (Recognizable copy of driver's license will suffice in place of a photograph).

**Vehicle(s) to be used: Make, Model, Year, License Plate Number:** (Attach sheet for additional vehicles)  
 \_\_\_\_\_

**Qualifications of Applicant/Owner/Agents (Please circle appropriate answer.)**

- |     |    |   |
|-----|----|---|
| Yes | No | Are you of Good Moral Character (Criminal History, License History, General Personal History)?  |
|     |    | Do you have.....  |
| Yes | No | Any Felony Convictions  |
| Yes | No | Any offenses involving the manufacture, sale, distribution or possession for sale or distribution of alcoholic beverages on your criminal record        |
| Yes | No | Any offenses involving the sale of drugs or felony possession of drugs on your criminal record  |
|     |    | Do you have .....   |
| Yes | No | Any other offenses determined by the City Council to have a direct bearing on your ability to serve the public  |
| Yes | No | Two or more convictions for driving or being in actual physical control of a motor vehicle while under the influence of intoxicating beverages or drugs |
|     |    | Have you ever been charged with or found guilty of?   |
| Yes | No | Prostitution  |
| Yes | No | Obscenity   |
| Yes | No | Do employees wear company uniform?  |

I certify that: the information in this application is true, correct, and complete to the best of my knowledge; a disclosure statement is not required; and, that if this permit is approved, I will comply with the City of Wahpeton ordinances, laws and rules, the conditions noted above.

It is hereby expressly understood that the City of Wahpeton will not be liable for refunds or rebates of any part or portion of the license fee paid in any case whatsoever. The applicant hereby agrees to conform to the provisions of the laws of the State of North Dakota; the City of Wahpeton assumes no responsibility whatsoever in cases where the equipment or apparatus of the license is in violation of State Law and seizure or confiscation or removal is ordered by other law enforcement agencies. The applicant will provide a copy of their current ND Sales Tax & Use Permit by Tax Commissioner and Mobile Food Unit by ND Department of Health (If selling food products).

\_\_\_\_\_  
Signature of person submitting application

**(For City Use Only)**

Date Application, Surety Bond, Sales Tax Use Permit, Mobile Food Unit License is Received: \_\_\_\_\_

**(For City Use Only)**

Date License Issued \_\_\_\_\_ Fee Received \$ \_\_\_\_\_

Date Application Denied \_\_\_\_\_

Reason for Denial \_\_\_\_\_

Police Chief Approval Yes No Date Approval Received \_\_\_\_\_

If denied, reason for denial \_\_\_\_\_

For Definitions reference:

Transient Merchant: Section 22-552 to 22-642

**License to be carried by licensees and exhibited on demand.**

State of North Dakota 51-04-03.1 Applicant must meet the qualifications for a state license pursuant to ND Century Code 5-02-02.

Ordinance Section 22-553 General Penalty

*Violation of any of the terms or provisions of this article for which another penalty is not expressly provided shall be punished by a fine not to exceed One Thousand Dollars (\$1,000.00) or imprisonment not to exceed Thirty (30) days, or both such fine and imprisonment. Each day any violation of this article continues or is permitted to continue shall be deemed a separate offense. Each such violation shall constitute a separate offense.*