CITY OF HOLSTEIN, IOWA



PEDDLER, SOLICITOR, TRANSIENT MERCHANT LICENSE APPLICATION (Chapter 122 of the City Code)

Application Date: _____

TYPE OF LICENSE (Check one):

 \Box Peddler \Box Solicitor \Box Transient Merchant

APPLICANT INFORMATION:				
Full Name:	Р	ermanent Add	lress:	
City:			State:	Zip:
Local Address (if different):				
City:			State:	Zip:
Business Address (if different):				
City:			State:	Zip:
Phone Number:		_Email:		
EMPLOYER INFORMATION (if a	applicable):			
Employer Name:		Emp	loyer Address:	
City:	State:	Zip:	Employer Phon	e:
BUSINESS INFORMATION:				
Nature of Business/Goods or Se	ervices Offered:			
Last Three Places Where Busin	ess Was Conducted	d:		
1				
2				
3				
License Duration Requested: Fr	om:	То:		(Not to exceed one year)

FOR TRANSIENT MERCHANTS ONLY:

	Number:		
VEHICLE INFORMATION (if	f applicable):		
Make:	Model:	Year:	
License Plate #:	State	::	
ICENSE FEE:			
ee Amount: \$20.00 per da	ау		
Number of Days:	x \$20.00 = Total Fee	: \$	
ACKNOWLEDGMENTS:			
By signing this application,	I acknowledge and agre	e to the followin	ng:
1. All information provided	l is true and correct to th	ne best of my kno	owledge.
2. I understand that this lic	cense is non-transferable	2.	
3. I understand that peddli	ing/soliciting activities ar	re permitted only	y between 8:00 AM and 6:00 PM.
I. I have read and understa	and Chapter 122 of the F	Holstein City Cod	de regarding licensing requirements.
5. Lunderstand that my lice	ense may be revoked for	r fraudulent stati	ements, ordinance violations, or actions
endangering public welfare		in addatent stat.	
Applicant Signature:		Date:	
FOR CITY OFFICE USE ONL Application Received By: _			Date:
license Fee Paid: \$			
3ond Verification (Transier	nt Merchants): 🗆 Yes 🗆		
·			
Bond Verification (Transier License:	enied		Expiration Date:

This license must be kept in possession while conducting business (peddlers/solicitors), or publicly displayed at the place of business (transient merchants).