

City of South Lyon
APPLICATION FOR PEDDLER/SOLICITOR PERMIT

NAME OF APPLICANT: _____

NAME OF COMPANY OR ORGANIZATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DRIVERS LICENSE #: _____ DOB: _____

DESCRIPTION OF BUSINESS AND GOODS TO BE SOLD: _____

WHERE GOODS ARE MANUFACTURED OR PRODUCED: _____

PROPOSED METHOD OF DELIVERY: _____

IF GOODS ARE TO BE SOLD AT SPECIFIC LOCATIONS, PLEASE LIST
PROPOSED LOCATION(S): _____

NAME OF OWNER OF PROPOSED PREMISES: _____

DATES OF ACTIVITIES: _____ HOURS OF OPERATION: _____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME, MISDEMEANOR OR
VIOLATION OF ANY MUNICIPAL ORDINANCE? _____

IF SO, EXPLAIN: _____

APPLICATION SHOULD ALSO INCLUDE THE FOLLOWING:

- DIAGRAM SHOWING THE LOCATION OF EACH CONCESSION ON THE PROPOSED PREMISES
- SPECIFICATIONS FOR ALL ELECTRICAL SOURCES
- TYPE AND LOCATION OF AVAILABLE SANITARY FACILITIES
- WRITTEN PERMISSION FROM PROPERTY OWNER

IF ADDITIONAL PERSONNEL IS TO BE USED FOR SOLICITING/PEDDLING, YOU MUST PROVIDE FULL NAME, DATE OF BIRTH AND DRIVER'S LICENSE # OF EACH PERSON.

(SIGNATURE OF APPLICANT)

(DATE)