

Peddler/Solicitor/Transient Merchant Business License Application



City of Marine City
Department of the City Clerk
260 S. Parker
Marine City, MI 48039
(810) 765-8846
clerk@cityofmarinecity.org

License Fee: \$5.00/day
\$20.00/month
\$100.00/6 months \$200.00/year
+\$5.00 ID Requirement
CASH/MONEY ORDER/CHECK ONLY

***A copy of a valid Driver's License MUST be provided at time of application**

Name: _____ Date of Birth: _____

Contact Number: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Driver's License # _____ State _____

Address _____
Street City State Zip

Name of Employer (if not self-employed): _____

Address _____
Street City State Zip

Describe business and goods to be sold: _____

Type of Business License Application:

PEDDLER _____ SOLICITOR _____ TRANSIENT _____

PEDDLER ~ Carries goods to be sold

SOLICITOR ~ Takes order for future delivery of goods or service

TRANSIENT ~ Retail sales and delivery of goods on temporary basis

Goods:

Where are goods manufactured? _____

Where are goods stored? _____

What is the delivery method? _____

Have you been in the U.S. Military Service? Yes _____ No _____

Have you ever been convicted of any crime, misdemeanor or municipal ordinance violation?

Yes _____ No _____

If yes, disclose the nature of the offense and punishment _____

Vehicle Information:

Type of Vehicle _____

Vehicle Year _____ Vehicle Make _____

Registration # _____

*If vehicle must be inspected by Marine City Police Department, call 810-765-4040 for an appointment.***Vehicle Insurance Information:**

Insurance Company: _____ Policy # _____

Address _____

Street

City

State

Zip

Indicate desired term of license:☐ \$5.00 per Day☐ \$100.00 per 6 Months☐ \$20.00 per Month☐ \$200.00 per Year**Background Check**

All applicants must submit a criminal background check valid within 30 days of application. Please visit www.michigan.gov/ichat to perform background check to be submitted with application. Background Check fee is \$10 per query. A passport style phot must also be supplied for the printing of the required ID that must be displayed or worn at all times while soliciting or peddling goods or services.

Certification

I certify that this business meets all County, State and/or Federal Licensing. I also certify that I have no outstanding overdue debt due to the city. I hereby certify that I am the owner, or am authorized to act on behalf of the owner, of the above described business. I further certify that to the best of my knowledge this is a true and correct application, and understand that the falsification of this application is cause for revocation or suspension of this license.

Applicant Signature: _____ Date: _____

CITY OFFICE USE ONLY

License Fee: \$ _____

Paid Date: _____

ID/Background Verified: _____

Outstanding Debt Verified: _____

Special Notes:

_____**Required Signatures**

City Clerk: _____ Date: _____

Chief of Police: _____ Date: _____

Term of License (Permit): _____ thru _____