## CITY OF SPOONER Application for Direct Seller Permit

Date of Acceptance/Registration:  (must be at least 5 days after application)  Date(s) selling:  Food Truck Vendors: If you are planning to set up your food truck near any City celebrations, request permission and coordinate directly with the sponsoring organization for that eve Identification and Certification:  Oriver's License #:  Date of Birth:  State  Date of Birth:  State Certification from sealer of weights and measures  (if applicable) YES  NO  N/A  State health certificate  (when food is involved) YES  NO  N/A  State of WI Seller's Permit #:  (rec	ent.
Date(s) selling: Food Truck Vendors: If you are planning to set up your food truck near any City celebrations, request permission and coordinate directly with the sponsoring organization for that ever Identification and Certification:    Driver's License #: State   Date of Birth:   State Certification from sealer of weights and measures (if applicable) YES NO N/A   State health certificate (when food is involved) YES NO N/A	ent.
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Identification and Certification:   ♦Driver's License #:	_
<ul> <li>◆Driver's License #:State</li></ul>	_ <sub>[</sub> uired)
◆Date of Birth:  ◆State Certification from sealer of weights and measures  (if applicable) YESNON/A  ◆State health certificate  (when food is involved) YESNON/A	_ <sub>[</sub> uired)
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(if applicable) YESNO N/A ◆State health certificate (when food is involved) YESNON/A	_ <sub>[uired)</sub>
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(when food is involved) YESNON/A(rec	_ <sub>[</sub> uired)
◆State of WI Seller's Permit #: (rec	uired)
FEE: \$10.00 per day per person for the first day & \$5.00 per day per person therea Seasonal Transient Merchant/Vendor Fee: \$100.00 Annual Plus actual background check fee imposed by the WI Dept of Justice	jier.
REGISTRATION INFORMATION	
PLEASE PRINT	
Name: MIDDLE LAST	_
Address:	-
City, State, Zip:	_
Telephone/Cell:	_
Social Security #:Driver's License #:	_
Color of Hair: Color of Eyes:	
Birthday: Weight:	
Name and address of Corporation/Business:	
Mailing Address, if different:	_
Nature of business/brief description of merchandise or services:	

Proposed method of delivery (if applicable):
Make, model and license of vehicle used in the conduct of business:
List the last three (3) cities, towns or villages this business was conducted:  1
2
Place where applicant can be contacted for at least seven (7) days after they have left Spooner:
Has applicant ever been convicted of a crime or an ordinance violation related to applicant's <b>business</b> within the last five (5) years: YES NO
If yes, the nature of the offense and place of the conviction:
Has applicant ever been convicted of a felony or misdemeanor since 17 <sup>th</sup> birthday? YES NO  As a juvenile, was applicant ever waived into adult court and convicted of a felony or misdemeanor? YES NO
Has applicant ever been convicted by a military court martial? YES NO
Has applicant ever been convicted of disorderly conduct that involved violence against another person? YES NO
List any Pending Citations, Tickets or Criminal Charges
List all Citations, Tickets, Municipal/Ordinance Violations and Criminal Convictions (excluding parking tickets). Attach additional paper if necessary.
SignedDated