



**LICENSE APPLICATION
FOR PEDDLERS, SOLICITORS AND TRANSIENT MERCHANTS**

NAME: _____ **DATE:** _____

SOCIAL SECURITY NUMBER: _____ **DATE OF BIRTH:** _____

PHONE: (____) _____ **EMAIL:** _____

PERMANENT ADDRESS, CITY, STATE, ZIP: _____

LOCAL ADDRESS, CITY, STATE, ZIP: _____

BUSINESS ADDRESS, CITY, STATE, ZIP: _____

EMPLOYERS NAME: _____

EMPLOYERS ADDRESS, CITY, STATE, ZIP: _____

NATURE OF BUSINESS: _____

LAST THREE PLACES OF SUCH BUSINESS: _____

LENGTH OF TIME SOUGHT TO BE COVERED BY LICENSE: _____ **TO** _____

\$1,000 BOND REQUIRED –

SURITY BOND COMPANY NAME: _____

ADDRESS, CITY, STATE, ZIP AND PHONE NUMBER: _____

(PEDDLER ONLY)

TO CERTIFY APPLICANT IS IN GOOD HEALTH AND FREE FROM ANY CONTAGIOUS DISEASE –

LOCAL PHYSICIAN OR HEALTH OFFICER PAID BY PEDDLER: _____

FEES:

_____ - \$25.00 APPLICATION FEE

_____ - \$100.00 LICENSE FEE PER DAY [LICENSE HOLDER]

_____ - \$50.00 LICENSE FEE [ADDITIONAL WORKERS]

_____ - \$5.00 PER APPLICANTS FOR BACKGROUND CHECK

_____ - \$15.00 PER APPLICANT FOR FINGER PRINTING SERVICES / TIME / MATERIALS

Applicant Signature _____ **Date** _____

Approved by _____ **Date** _____

THE UNDERSIGNED HEREBY APPOINTS THE CITY OF PRAIRIE
CITY CLERK AS AGENT FOR THE UNDERSIGNED SERVICE OF
PROCESS IN THE EVENT OF ANY CLAIM OR LITIGATION
AGAINST THE UNDERSIGNED ARISING OUT OF OR IN
CONNECTION WITH ANY PEDDLING OR SOLICITATION.

BE SURE TO NOTE ON THE APPLICANT'S LICENSE THAT IT IS
IN FORCE AND EFFECT ONLY BETWEEN THE HOURS OF 8:00
AM AND 6:00 PM.

THESE HOURS APPLY TO PEDDLERS AND SOLICITORS

THE APPLICANT IS REQUIRED TO HAVE A VALID IOWA SALES
TAX PERMIT

RECENT PHOTOGRAPH/DRIVERS LICENSE NEEDED FOR
LICENSE HOLDER AND ADDITIONAL WORKERS

BACKGROUND SCREEN NEEDED FOR LICENSE HOLDER AND
ADDITIONAL WORKERS