

# City of Eagle River Application for Direct Sales Permit

**Completed applications must be turned in at least 4 weeks prior to the event date for processing purposes!**

**Fee Schedule:** 1 Week \$50.00  1 Month \$75.00  6 Months \$150.00  1 Year \$250.00   
Promoter Fee per Event \$250.00  (when applicable)

**EMPLOYERS NAME:** \_\_\_\_\_  
*First M.I. Last*

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Email Address \_\_\_\_\_ Birthdate: \_\_\_\_\_  
*(Must be at least 18 years of age)*

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

**SELLERS NAME (if different than employer):**

\_\_\_\_\_  
*First M.I. Last*

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Email Address \_\_\_\_\_ Birthdate: \_\_\_\_\_  
*(Must be at least 18 years of age)*

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Location (*i.e., landmark or intersection*) of Event:

\_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Nature of business being conducted, and description of goods being offered: \_\_\_\_\_

\_\_\_\_\_

Proposed method of delivery, if applicable: \_\_\_\_\_

Make, Model, and License Plate Number(s) of vehicle(s) used by applicant to conduct business.

Vehicle #1 \_\_\_\_\_

Vehicle #2 \_\_\_\_\_

Vehicle #3 \_\_\_\_\_

**Please note: If displaying goods on private property, an authorization from the owner is required, and needs to be attached to this application.**

\_\_\_\_\_  
*Signature of Employer or Applicant*

\_\_\_\_\_  
*Date*

## **Registration Requirements:**

Attach a photocopy of driver's license or valid identification.

Attach a photocopy of a state certificate of examination and approval from the sealer of weights and measure if applicable.

Attach a photocopy of a state health certificate dated not more than 90 days prior to the date of application where business involves handling of food or clothing if applicable.

Attach a \$1,000,000 current Certificate of Liability Insurance with City of Eagle River listed as certificate holder:

List other Cities, Villages, or Towns, not to exceed three (3), where permission was allowed to conduct a similar business:

\_\_\_\_\_  
\_\_\_\_\_

Statement as to whether the applicant has been convicted of any crime or ordinance violation related to applicants transient merchant business with in the last five (5) years: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Signature constitutes a consent for the City Police Department to run a criminal background check on the applicant.**

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*



**For Office Use:**

Results of the investigation by the Police Department: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature of the Chief of Police*

\_\_\_\_\_  
*Date*

Application Approved: \_\_\_\_\_ Application Denied: \_\_\_\_\_

Reason if Denied: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Approval and fee set by the City Council tendered at time of application: \_\_\_\_\_

The issuing of a permit shall take place by the clerk upon payment from the applicant.

\_\_\_\_\_  
*Signature of City Clerk*

\_\_\_\_\_  
*Date*

**For Office Use ONLY:**

Application Rec'd: \_\_\_\_\_ Permit Fee Paid: \_\_\_\_\_ Authorization Letter Rec'd: \_\_\_\_\_  
Date Given to PD: \_\_\_\_\_ Date Returned from PD: \_\_\_\_\_  
Permit # Assigned: \_\_\_\_\_ Permit Mailed: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

