



**CHARTER TOWNSHIP OF WATERFORD**

**CLERK'S OFFICE**

5200 Civic Center Dr. • Waterford, MI 48329

Phone 248-674-6266 • Fax 248-674-5455

Web Page www.waterfordmi.gov

**PEDDLER LICENSE APPLICATION**

**CLERK'S USE ONLY**

Date Received: \_\_\_\_\_ Non-Refundable Application Fee \$50.00 and \$10.00 each additional person  Paid

Date Sent to Depts Police: \_\_\_\_\_ Response from Police: \_\_\_\_\_ License Number (if issued) \_\_\_\_\_

Date and Location \_\_\_\_\_

**Peddler means any person engaged in peddling for profit in the Township by traveling by foot**, motor vehicle or other conveyance from place to place, from house to house, or from street to street, or who does so from or at a stand, motor vehicle, or trailer. Any person who offers to take orders or tentative orders and, as a separate transaction, confirms the order or makes deliveries to purchasers as part of an transient merchant scheme or design to evade the provisions of this Article shall be deemed a peddler. The term "peddler" shall not include a person who conducts such activities at a social gathering within a home at the invitation of the owner or an occupant of the home.

**1. New Application**

Complete all pages 1 through 5.

**Add-On**

Original Application Date \_\_\_\_\_

One time within 30 days of the original application date.

**Renewal**

Complete only page 1 if there have been no changes since original application including but not limited to: solicitors, iChat report, times and locations of peddling, etc.)

\_\_\_\_\_  
Signature and Date of Renewal

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

**2. Contact Person**

NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS	

**3. Peddler's Parent Organization**

NAME		Tax ID Number	
BUSINESS STREET ADDRESS		CITY	STATE ZIP CODE
BUSINESS PHONE		WEBSITE ADDRESS	
WHEN AND WHERE PARENT ORGANIZATION WAS ESTABLISH OR INCORPORATED AND THE FORM OF ORGANIZATION			

**4. List all persons who propose to peddle within the Township**

NAME			DATE OF BIRTH
BUSINESS STREET ADDRESS	CITY	STATE	ZIP CODE
HOME STREET ADDRESS	CITY	STATE	ZIP CODE
BUSINESS PHONE	HOME PHONE	CELL PHONE	
WEBSITE ADDRESS, IF ANY		E-MAIL ADDRESS	
DRIVER'S LICENSE NUMBER		PHYSICAL DESCRIPTION	
HEIGHT	WEIGHT	COLOR OF HAIR / LENGTH	EYES
LIST ALL FELONY AND MISDEMEANOR CONVICTIONS		ARRESTING AGENCY	DATE
LIST ALL FELONY AND MISDEMEANOR CONVICTIONS		ARRESTING AGENCY	DATE

NAME			DATE OF BIRTH
BUSINESS STREET ADDRESS	CITY	STATE	ZIP CODE
HOME STREET ADDRESS	CITY	STATE	ZIP CODE
BUSINESS PHONE	HOME PHONE	CELL PHONE	
WEBSITE ADDRESS, IF ANY		E-MAIL ADDRESS	
DRIVER'S LICENSE NUMBER		PHYSICAL DESCRIPTION	
HEIGHT	WEIGHT	COLOR OF HAIR / LENGTH	EYES
LIST ALL FELONY AND MISDEMEANOR CONVICTIONS		ARRESTING AGENCY	DATE
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NAME			DATE OF BIRTH
BUSINESS STREET ADDRESS	CITY	STATE	ZIP CODE
HOME STREET ADDRESS	CITY	STATE	ZIP CODE
BUSINESS PHONE	HOME PHONE	CELL PHONE	
WEBSITE ADDRESS, IF ANY		E-MAIL ADDRESS	
DRIVER'S LICENSE NUMBER		PHYSICAL DESCRIPTION	
HEIGHT	WEIGHT	COLOR OF HAIR / LENGTH	EYES
LIST ALL FELONY AND MISDEMEANOR CONVICTIONS		ARRESTING AGENCY	DATE
LIST ALL FELONY AND MISDEMEANOR CONVICTIONS		ARRESTING AGENCY	DATE

**5. ATTACH an ichtat criminal background check for every peddler.**

**6. List the dates, times, and locations where peddling will occur.**

Date	Location	Time

**7. Provide the types of goods, wares, merchandise and services to be sold, offered, or for which orders will be taken.**

**8. Has the applicant or parent organization ever been denied a license for peddling, had a license for peddling suspended or revoked, or been prohibited from peddling in the Township or any other community?**

If multiple Peddler's please answer for each Peddler.

Yes  No

9. Has the applicant, or any officer, partner, member, manager, or director of the parent organization been convicted of a felony or any misdemeanor for a violation of federal, state or local laws, ordinances, or regulations reflecting adversely on the applicant's ability to conduct the business for which the license is being sought in an honest and legal manner, including, but not limited to, burglary, theft, larceny, swindling, fraud, unlawful business practices, any form of actual or threatened physical harm against another person, or any type of criminal sexual conduct, and if so, a brief description of the crime or violation, including its location and date, and an explanation of the reason therefore. Yes  No

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10. **Attach** two (2) color photographs of the applicant, one (1) being a photograph taken within sixty (60) days prior to the date of filing of the application and the other photograph being from the applicant's driver's license or other governmentally issued identification, with a copy of such driver's license to be attached to the application. The photograph that is not from the applicant's driver's license shall be at least two (2) inches by two (2) inches and shall show the head and shoulders of the applicant in a clear and distinguishing manner. In the event that the applicant has not been issued a driver's license or it has been revoked, then the applicant shall submit a second separate photograph with the application, such photograph being at least two (2) inches by two (2) inches and shall show the head and shoulders of the applicant in a clear and distinguishing manner.
11. **Attach** a criminal background report of the applicant's criminal history. Such reports shall be obtained by the applicant through the Internet Criminal History Access Tool (ICHAT) for applicants residing in Michigan and/or through another state-sponsored or authorized criminal history access source for applicants who reside in other states or have resided in other states within five (5) years prior to the date of the application. The applicant is responsible for all charges incurred in requesting and receiving the ICHAT report or other criminal history report and the report must be dated within thirty (30) days of the date of the application.
12. **Attach** the applicant's and parent organization's state of Michigan sales tax license number.
13. **Attach**, if under eighteen (18) years of age, the applicant must provide a copy of a valid work permit issued by the applicant's school, school district offices or other authorized issuing agency to the applicant for purposes of the peddling activity proposed to be undertaken in the Township.
14. **Attach** if the applicant will be engaging in peddling using, from, or out of a motor vehicle on the streets of the Township, the applicant must provide information to verify that the applicant has a valid driver's license, has not been convicted of a misdemeanor or felony moving violation within the last three (3) years, and has not been found responsible for three (3) or more motor vehicle moving violations under the Michigan Motor Vehicle Code or local ordinances within the last three (3) years. Any such motor vehicle shall be brought to the Township and inspected by a designated representative of the police department and must be found to meet any safety standards adopted by the police department and any standards adopted by the State of Michigan, and the police department's checklist form signed by the designated police department representative verifying such compliance shall be submitted with the application.

15. **Attach** if the applicant will be engaging in the sale of food or beverages, a health license issued by the Oakland County Health Department. Such peddler's equipment shall be subject to inspections by the Oakland County Health Department at the time of application, as required by the state public health code.

16. I, the undersigned applicant, have read and understand each and every provision and requirement of **Waterford Township Code Chapter 10 Article XII** regarding the regulation of charitable funds solicitation activities in the Township and I will provide such other information that the Township requests and deems necessary, in its reasonable discretion, to discover the truth of the matters required to be set forth in this registration or required by Township Ordinances.

The individual signing the registration statement shall sign the statement and swear before an office authorized to administer oaths that he/she has carefully read the registration statement and that all the information contained therein is true and correct. Also, if a Certificate of Registration is granted, such certificate will not be used as or represented to be an endorsement by the Township or any of its officers or employees.

17. **The Clerk's office will add additional Peddlers to an approved application one (1) time within 30 days of the original application date. After 30 days additional Peddlers would need to complete a new peddler's application along with the non-refundable fifty (\$50.00) application fee.**

**All individuals soliciting must wear the ID badge provided by the Township.**

DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

Note: If signer is signing on behalf of a corporation, partnership or LLC, identify the signer's position and authority to sign in such capacity.

Acknowledged before me on \_\_\_\_\_

By \_\_\_\_\_

Notary Public

Acting in \_\_\_\_\_ County, Michigan

\_\_\_\_\_ County, Michigan

My Commission Expires: \_\_\_\_\_