

PEDDLER OR SOLICITOR APPLICATION FOR A CITY LICENSE

City of Grand Mound 615 Sunnyside Street, P.O. Box 206 Grand Mound, IA 52751 gmcity@gmtel.net

1-563-847-2190

Name of Applicant Social Security No. Driver's License No. Mailing Address City/State/Zip Aliases (list all used) Date of Birth Phone No. Name of Company			
	he City with a copy of the	a license shall be issued to a tra e Surety Bond filed with the Sect	
Make/Model/Year/Color/I	License Plate of transien	nt merchant vehicle/trailer:	
List all felonies and misd	lemeanor convictions, in	cluding traffic violations for the la	ast ten (10) years:
reference check: 1)	e towns/places of Peddli		hone number for a
Has a similar license from	m the City of Grand Mou	nd or any other jurisdiction beer	n revoked? Yes No
Transient Merchant or Pe 1 day \$25.00		6 months \$75.00	1 year \$125.00
Application Fee: \$15.00 Please include a copy of Complete a Clinton Cour	f your photo ID	quest Form	

Sign the DCI Records Request Form
Please make payments payable to the City of Grand Mound: Total Fees due \$
*All items must be completed and submitted to the City Clerk before the application can be processed. Please allow at least 2 WEEKS for your City license/permit to be processed. Licenses are non-transferable and must be displayed. The permit is only valid between the hours of 8:00 a.m 6:00 p.m. CST (Except on the 4th of July Holiday- Hours are extended until midnight cst).
*The application period/deadline for the 4th of July peddler permit is March 15th through May 15th each year. It is recommended that you apply as early as possible to avoid any delay in receiving a permit. Applicants shall allow a minimum of two weeks for the City license to be processed. Applications shall be denied for falsifying information, confirmation of a criminal background, written complaints on file from citizens, or if the reference check concludes the applicant is banned from a past place of business, or as deemed in the City of Grand Mound's City Code Chapter 122. Applicants who are denied may request an appeal hearing by submitting a written request for an appeal to the City Clerk. The appeal hearing will be before the City Council and held during the June City Council Meeting.
I,, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the City of Grand Mound, Iowa, whether said records are of a public, private or confidential matter, including criminal histories. My signature below is proof of my acknowledgment and I am aware of Section 122 of the City Code of Grand Mound and agree to abide by those rules. All information I have provided is true and accurate to the best of my knowledge.
(Applicant's Signature) Date:
(Applicant's Signature) Date: Office Use Only: Application is Approved Denied City application complete All fees paid Copy of Photo ID Copy of Insurance (Transient) Proof of Bond (Transient) DCI Background Rcvd Clinton County Sheriff Report
Office Use Only: Application is Approved Denied City application complete All fees paid Copy of Photo ID Copy of Insurance (Transient) Proof of Bond (Transient) DCI Background Rcvd
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