



City of Minneapolis  
 Licenses and Consumer Services  
 350 South 5<sup>th</sup> Street – Room 1C  
 Minneapolis, MN 55415-1391  
 Phone: 612-673-2080  
 Fax: 612-673-3399 TTY:612-673-2157  
[www.minneapolismn.gov/business-licensing](http://www.minneapolismn.gov/business-licensing)

DBA:	
Expiration: June 1	
License Code: L035	
Rev Code: 311008	
<u>MCO</u> : 332	
Adm Issuance: Yes	
LICENSE ID #	
CSR:	

## License Application Guidelines and Checklist

### License Type: Peddler

**Definition:** A person who offers merchandise or services for sale door-to-door, including house-to house, business-to-business, street-to-street, or any other type of place-to-place movement. Delivery and payment occur immediately. (L035)

**Similar Licenses:**

**Solicitor:** A person who obtains orders for merchandise or services for future delivery. Registration required. No fee. (L040)

**Transient Merchant:** A person who temporarily sets up business out of a vehicle, trailer, boxcar, tent, other portable shelter, or empty store front for the purpose of selling goods. Individuals may not remain in one location for more than 14 consecutive days. Delivery and payment occur immediately. (L142)

**Non-Commercial Advocate:** A person who disseminates religious, political, social, or other ideological beliefs. No registration, license, or identification card is required.

**Youth Fundraiser:** A person, age 17 and under, selling merchandise or services or seeking donations on behalf of a school, church, sports or scouting organization. One registration is required per group and individuals must display a city approved identification badge. No fee. (L039)

Staff Initials	Application Checklist
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	<input type="checkbox"/> <b>1. License Application</b> (Form #1)
	<input type="checkbox"/> <b>2. Photo ID:</b> Attach a copy of a driver’s license or government issued photo identification card.
	<input type="checkbox"/> <b>3. Criminal Background Report</b> – Available from <a href="http://www.cch.state.mn.us">www.cch.state.mn.us</a> /New Criminal History Search or the State of Minnesota, Bureau of Criminal Apprehension, 1430 Maryland Ave E. St. Paul, MN 651-793-2400. If you have lived in another state within the past five years, you must attach a report from the other states you lived. Use the <a href="#">Criminal Record Contact List by State</a> on our website. <i>These reports must be dated within 30 days of receipt of this application.</i>
	<input type="checkbox"/> <b>4. Fee:</b> _____ plus <a href="#">New License Surcharge</a> : _____

**1. Your License Application**

- a. Incomplete applications will be returned.
- b. Licenses are not transferable.
- c. Make a duplicate copy of this packet for your personal records before submitting.

**2. Identification Cards**

Each solicitor, peddler, and transient merchant will be issued an identification card from the division of Licenses and Consumer Services which expires on June 30<sup>th</sup> each year unless otherwise noted on your identification card. You are required to display your identification card at all times while engaged in solicitation and present upon request.

**3. Information in Other Languages**

Yog xav paub tshaj nos ntxiv, hu 612-673-2800. Macluumaad dheeri ah, kala soo xiriir 612-673-3500. Para mas información llame al 612-673-2700.



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## License Application/Registration For Peddlers, Solicitors, and Transient Merchants

1. BACKGROUND INFORMATION			
Applicant (First, Middle, Last)		<input type="checkbox"/> Peddler <input type="checkbox"/> Solicitor <input type="checkbox"/> Transient Merchant	
Other names you have ever used or been known by (First, Middle, and/or Last)			
Home Street Address	City	State	Zip Code
Local Address (If home address is out of state)	City	State	Zip Code
Social Security or Individual Tax ID	E-mail Address	Cell Phone Number	
Name of Business/Company	Telephone Number	Fax Number	
Street Address of Business	City	State	Zip Code
Name of Manager	E-mail Address	Cell Phone Number	
Describe in detail the type and brand name of the merchandise or services for sale			
List the last three locations where you have worked as a peddler, solicitor, or transient merchant.			
1. _____ 2. _____ 3. _____			
Are you an <input type="checkbox"/> owner <input type="checkbox"/> operator <input type="checkbox"/> manager <input type="checkbox"/> agent and/or <input type="checkbox"/> employee of any business? If yes, list the business name(s).			
List any licenses currently or previously held in Minneapolis.			
Have you ever had a business license denied or revoked by Minneapolis or another government entity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate the date of denial/revocation, governmental agency, and reason for denial/revocation.			
2. IDENTIFICATION CARD REQUIREMENTS			
Date of Birth (dd/mm/yyyy)	Age	Height _____ ft _____ in	Weight _____ lbs
Hair Color	Eye Color	Race/Complexion	
3. VEHICLE INFORMATION			
Year	Make	Model	
Color	License Plate	Last six digits of VIN	

**4. DATA PRIVACY ADVISORY – This section is not required for Solicitor’s Registration**

Have you been convicted of a felony or gross misdemeanor within the past five years?  Yes  No  N/A Solicitors

The Minnesota Data Practices Act requires that you be advised of the following information:

As an applicant for a Minneapolis business license, you are asked to provide private and/or confidential information about yourself that will be used to check driving history, criminal history, arrest records, warrant information, and other relevant records. You may refuse to provide this information. However, should you refuse, our investigation cannot be completed and will result in your application not being processed. With the exception of your Social Security Number, the information you provide is public and will be used by the Minneapolis Police Department, the Minneapolis Division of Licenses and Consumer Services, the Minneapolis City Council and/or the general public. This AUTHORIZATION FOR RELEASE OF INFORMATION will expire two years from the date you sign it.

I have read and understand the above Data Practices Advisory.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**5. VERIFICATION**

The data you furnish on this application will be used by the City of Minneapolis to assess your qualifications for licensure. Disclosure of this information is voluntary. You are not legally required to provide this data; however, if you fail to do so, the City of Minneapolis may be unable to process this application. Disclosure of your Minnesota Tax ID Number, Social Security Number, or Individual Tax ID Number is required by Minnesota Statutes 270C.72, and your Social Security number may be requested by and released to the Minnesota Commissioner of Revenue. After submission, all information contained in this application except your Social Security Number will be public information pursuant to Minnesota Statutes, Chapter 13.

**A SIGNATURE IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION.**

I, (print name) \_\_\_\_\_, certify or declare under penalty of perjury under the laws of the State of Minnesota that the foregoing is true and correct. All information given is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension or revocation of my business license.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_