

Transient Merchants REGISTRATION

ı	Secu	on 1: Applicant in	iormation						
	Name								
	Address	City							
	Street	City		State	Zip				
	Phone	Cell Phone							
	E-mail Address								
	Have you ever been denied a Transie	nt Merchants permit?	Yes No						
	If yes, when and where?								
	Section 2:	Business/Organiza	ation Information	on					
_									
•	Name								
	AddressStreet	City		State					
				Glate	2.10				
•	Phone								
	Type of business to be conducted or p	product or services to b	e sold:						
۱.	Date of proposed business operation:	From	To						
	Daily Hours for Soliciting: 9:00 AM until 9:00 PM								
	List any cities that have issued permit	s to you in the last 12 n	nonths:						
	, i	•							
	Sect	ion 3: Vehicle Info	ormation						
•	Please provide the following informati	on for any vehicles to b	e used:						
	Make	Year	_ Plate #		_ State				
	Make	Year	Plate #		State				



CONSENT FOR RELEASE OF INFORMATION

I authorize the City of Prior Lake to release criminal history data, as defined by Minnesota Statute 13.87, subd.1 and driver's license and traffic record data to the Prior Lake City Manager, City Clerk and the City Council for the City of Prior Lake. I understand that some of this data may be classified as private data under Minnesota statutes and I hereby give my informed consent to the release of this private data by the City of Prior Lake Police Department to the City Manager, City Clerk, and City Council.

I certify that the information provided on this application is truthful and I understand that false statements or omissions will result in denial of this application. I hereby authorize the City of Prior Lake to use this information to determine my eligibility to obtain a license/permit.

Full Name										
Full Name(First)		(Full Middle)		(Last)						
Home Address										
City		State		Zip						
Contact Phone NumberDate of Birth										
Driver's License Sta	ite and Nur	nber								
Please list any other names you are or have been known by:										
Sex: □ Male	□ Female									
Race: □ White/Ca	aucasian	☐ African American	□Hispanic	□Asian						
Signature of Applica	 t				 Date					