



City of New Prague  
 118 Central Ave N  
 New Prague, MN 56071  
 952-758-4401  
 Email: info@ci.new-prague.mn.us

## APPLICATION FOR A PEDDLERS / TRANSIENT MERCHANTS LICENSE

Each person wishing to conduct business as a peddler or transient merchant must complete an application form. Failure to provide complete and accurate information will result in denial of the license.

### Instructions to the Applicant

The applicant must complete an application in person at least 14 regular business days before conducting business. The application will be reviewed, and upon approval, a background check will be conducted. Once the review is complete, the applicant will be notified if the application has been approved or denied. The fee associated with the application will not be refunded if the application is denied. If the license is approved a license will be issued to the applicant.

Note: Business can **ONLY** be conducted Monday thru Friday between the hours of 7 a.m. to 9 p.m.

### Applications must include the following:

1. A fee payable to the City of New Prague in the amount set by the city's official fee schedule;
2. Signed copy of the Minnesota Data Practices Act, (a background investigation consent release form) for each person on the application.
3. A copy of a valid driver's license or valid government-issued identification for each person on the application.
4. Transient Merchants **must submit written permission from the owner of the property** for which sales will be conducted.

### The license you are applying for:

Peddler: A person who goes from house-to-house, door-to-door, business-to-business, street-to-street, or any other type of place-to-place, for the purpose of offering for sale, displaying or exposing for sale, selling or attempting to sell, and delivering immediately upon sale, the goods, wares, products, merchandise or other personal property that the person is carrying or otherwise transporting. The term PEDDLER shall mean the same as the term HAWKER. Delivery and payment occur immediately.

Transient Merchant: A person who temporarily sets up business out of a vehicle, trailer, boxcar, tent, other portable shelter, empty store front, parking lot, or vacant lot for the purpose of exposing or displaying for sale, selling or attempting to sell, and delivering, goods, wares, products, merchandise or other personal property. It shall also mean a person who provides services from the above locations except that services shall not include massage services, tattoo parlors and other similar activities or activities that are prohibited elsewhere in the corresponding zoning district. **A transient merchant must not remain or intend to remain in any one location for more than 14 consecutive days, or at any location within the city for a period exceeding 60 total days during a calendar year.**

<b>Applicant Information</b>	Full Legal Name: _____			
	First	Middle	Last	
Height: _____	Weight: _____	Eye Color: _____	Hair Color: _____	
Permanent Address: _____				
	Street	City	State	Zip
Permanent Residential Phone: _____		Business Phone: _____		
Cell Phone: _____		Email Address: _____		

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Driver's License / Identification Information:

Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

All other names under which you conduct business or officially answer: \_\_\_\_\_

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Full legal name of all business operations owned, managed, or operated by you or which you are an employee or agent: Please provide the City, State, and Name of Business:

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Provide the last three locations where you have conducted business as a peddler or transient merchant. Please provide the City, State, Name of Business, and dates:

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**Business  
Information**

Name of Company: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Website Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

License Activity Information:

Describe the type of business to which the license applies: \_\_\_\_\_

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Describe generally the items to be sold and or services provided: \_\_\_\_\_

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Location(s) of Sales:  Door-to-Door  Other: \_\_\_\_\_

**Business Start Date:** \_\_\_\_\_ **Business End Date:** \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

*Note: A transient merchant must not remain or intend to remain in any one location for more than 14 consecutive days, or at any location within the city for a period exceeding 60 total days during a calendar year.*

**Transient  
Merchants  
Only**

*A written consent from property owner must be submitted with this application.*

Property name where business will be conducted: \_\_\_\_\_

Property Address: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Has the applicant been convicted within the last five (5) years of any felony, gross misdemeanor, or misdemeanor for violation of any state or federal statute of any local ordinance, other than traffic offenses?

Yes  No

I agree to operate such business in accordance with the laws of Minnesota and the ordinances of the City of New Prague. The forgoing statements are true and correct to the best of my knowledge and belief.

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Date received: \_\_\_\_\_ By: \_\_\_\_\_

Copy of Driver's License  Yes

Background check completed  Yes  No

Approved  Denied By: \_\_\_\_\_ Date: \_\_\_\_\_

License issued to Peddler/Transient Merchant Applicant  Yes  No Date: \_\_\_\_\_

Attached hard copy for Police Department

**\* List all individuals involved in Peddling, and Transient Merchant**

Name (*First, Middle, Last*): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

**Have you been convicted within the last five years of any felony, gross misdemeanor or misdemeanor for violation of any state or federal statute or any local ordinance, other than traffic offenses?** Yes  No

**Vehicle used in Operation** Make & Model: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Year: \_\_\_\_\_

Name (*First, Middle, Last*): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

**Have you been convicted within the last five years of any felony, gross misdemeanor, or misdemeanor for violation of any state or federal statute or any local ordinance, other than traffic offenses?** Yes  No

**Vehicle used in Operation** Make & Model: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Year: \_\_\_\_\_

Name (*First, Middle, Last*): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

**Have you been convicted within the last five years of any felony, gross misdemeanor, or misdemeanor for violation of any state or federal statute or any local ordinance, other than traffic offenses?** Yes  No

**Vehicle used in Operation** Make & Model: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Year: \_\_\_\_\_

Name (*First, Middle, Last*): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

**Have you been convicted within the last five years of any felony, gross misdemeanor, or misdemeanor for violation of any state or federal statute or any local ordinance, other than traffic offenses?** Yes  No

**Vehicle used in Operation** Make & Model: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Year: \_\_\_\_\_



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## Pursuant to Minnesota Statute 13.05, Subd. 4 Minnesota Data Practices Act

I, \_\_\_\_\_, birth date \_\_\_\_\_, hereby authorize and grant my informed consent to allow the City of New Prague's Police Department to conduct a criminal history check in conjunction with my Peddlers/Transient Merchant License. Minnesota Statutes Section 299C.72 authorizes the City to conduct a criminal history check in these situations, provided the City receives the informed consent of the individual.

I understand that the New Prague Police Department will be conducting a criminal history check on me, and that this information (data), in addition to the information in my application, will be considered by the City in determining whether or not to grant approval of my license application. A criminal history check is authorized to be performed by the City relating to this type of license application.

I understand the criminal history data consists of private data on individuals, as defined by Minnesota Statutes Section 13.02, subdivision 12 and Minnesota Statutes Section 13.87. The City of New Prague Police Department will not disseminate my criminal history data and will maintain it securely within the department. However, the City of New Prague's Police Department will inform the appropriate City personnel involved in the processing of the license application, whether I have a criminal history that would prevent the issuance of the license.

I understand that the purpose of permitting the City of New Prague to have access to this information is to determine my suitability to engage in Peddlers/Transient Merchant License and that I am not legally required to provide this information, however the City will not license persons who refuse to submit to this investigation.

This authorization shall be valid for a period of one year, but I reserve the right to, at any time prior to that expiration, cancel the written authorization by providing written notice to the City.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date