



OFFICE OF CITY CLERK  
248.871.2410  
www.fhgov.com

**CITY OF FARMINGTON HILLS  
APPLICATION - PEDDLER LICENSE**

**Fee: \$50.00**  
Non-refundable

PLEASE TYPE OR PRINT:

**Valid for 120 Days**

APPLICANT NAME: \_\_\_\_\_ PHONE \_\_\_\_\_

APPLICANT HOME ADDRESS: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ DRIVER'S LICENSE # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SEX: M \_\_\_ F \_\_\_ HEIGHT: \_\_\_ Ft \_\_\_ In

HAIR COLOR \_\_\_\_\_ EYE COLOR \_\_\_\_\_ WEIGHT \_\_\_\_\_

NAME OF PARENT ORGANIZATION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

COMPANY WEBSITE ADDRESS: \_\_\_\_\_

COMPANY TELEPHONE NUMBER \_\_\_\_\_

FEDERAL EMPLOYER ID NUMBER of parent organization \_\_\_\_\_

STATE OF MICHIGAN SALES TAX LICENSE # \_\_\_\_\_

(If exempt – state basis for exemption) \_\_\_\_\_

Where and when parent organization was established or incorporated and the form of its organization: \_\_\_\_\_  
\_\_\_\_\_

Has the applicant or parent organization ever been denied a license for peddling; had a license suspended or revoked or been prohibited from peddling in any community in the past?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PLEASE EXPLAIN

Has the applicant or any officer/partner/member/director of the parent organization been convicted of a felony or any misdemeanor involving moral turpitude?

\_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, PLEASE DESCRIBE THE CRIME, INCLUDING ITS LOCATION AND DATE AND REASON THEREFORE:

START DATE OF PEDDLING: \_\_\_\_\_ END DATE: \_\_\_\_\_

LOCATION PROPOSED FOR PEDDLING: \_\_\_\_\_

HOURS OF PEDDLING: \_\_\_\_\_ (10 am to 8 pm or Sunset, whichever is earlier)

TYPES OF GOODS/MERCHANDISE TO BE SOLD \_\_\_\_\_

I hereby declare under penalty or perjury that the foregoing information contained in this application is true and correct, such declaration being duly dated and signed in the City. I further understand that misstatements and inaccuracies in the application are grounds for immediate termination of said license. I hereby authorize the city, its agents and employees to seek information and conduct an investigation into the truth of the statements set forth in the application and the qualifications of the applicant for this license.

X \_\_\_\_\_ DATE \_\_\_\_\_  
(APPLICANT'S SIGNATURE)

APPLICANT MUST SUBMIT APPLICATION FORM, THE FOLLOWING DOCUMENTS AND APPROPRIATE FEE BEFORE INVESTIGATION AND LICENSE CONSIDERATION WILL BEGIN.

- Detailed description of the type of peddling to be undertaken and the method to be used in conducting the peddling.
- One color photograph of the applicant at least two inches by two inches (2" x 2") which shall show the head and shoulders of the applicant in a clear and distinguishing manner.
- Copy of Driver's License (if applicant does not have Drivers License, 2 photographs are required)
- An ICHAT report dated within 30 days of the date of this application; available at [www.michigan.gov/ICHAT](http://www.michigan.gov/ICHAT)
- If under age 18, a valid work permit (Issued by school district)
- If peddling out of a motor vehicle, applicant must pay an additional \$40 non-refundable fee for a vehicle inspection by the Police Department. Contact the Police Department to schedule an inspection at 248.871-2630. **You must provide a receipt for the \$40 to the Police Department in order to have your vehicle inspected.** IT IS SUGGESTED THAT YOU WAIT UNTIL YOUR APPLICATION HAS BEEN APPROVED BEFORE YOU GET THE VEHICLE INSPECTION AS THE \$40 IS NON REFUNDABLE.

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**For OFFICE USE ONLY**

**DATE SENT TO POLICE DEPT:** \_\_\_\_\_

**DATE APPROVED BY POLICE DEPT:** \_\_\_\_\_

**APPROVED** \_\_\_\_\_ **DENIED** \_\_\_\_\_ **BY WHOM:** \_\_\_\_\_

