




---

## CANVASSER, STREET PEDDLER, AND TRANSIENT MERCHANT LICENSE APPLICATION

---

 Peddler

 Transient Merchant

 Canvasser or Solicitor

Employer Name (if applicable)		Form of Business/State of Incorp.	
DBA (if applicable)		Applicant's Relationship to Employer	
Employer Address		City	State, Zip
Employer Phone	Employer Fax	Employer Email	
Applicant		Date of Birth	Social Security No.
Height	Weight	Hair Color	Eye Color
Applicant Legal Address		City	State, Zip
Applicant Local Address (if different)		City	State, Zip
Applicant Phone	Applicant Email	Other Contact	
Make, model, & color of vehicle to be used	License Plate	VIN	
Make, model, & color of vehicle to be used	License Plate	VIN	
Anticipated/desired starting date		Length of time	

Lansing City Clerk's Office  
 Ninth Floor, City Hall, 124 W. Michigan Ave., Lansing, MI 48933-1695  
 517-483-4131 • TDD 517-483-4479 • 517-377-0068 FAX  
[www.lansingmi.gov/clerk](http://www.lansingmi.gov/clerk) • [clerk@lansingmi.gov](mailto:clerk@lansingmi.gov)

All other appropriate licenses or certifications required by law to conduct this business have been obtained.

Have you ever been convicted of any crime, misdemeanor, or violation of any municipal ordinance?

Yes       No      If yes, what was the nature of the offense and what penalty was imposed?

\_\_\_\_\_  
\_\_\_\_\_

Describe the nature of the business and the goods to be sold. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If goods to be sold are farm or orchard products, were they produced or grown by you?  Yes  No

Please state (1) where the goods to be sold are manufactured or produced, (2) current location of goods, and (3) proposed method of delivery.

\_\_\_\_\_  
\_\_\_\_\_

Requirements:

1. License fee. Peddler or Canvasser \$75, first applicant per business; \$10, each additional applicant. Transient Merchant \$75 per location.
2. Background Check Fee. \$25 for each person to be licensed.
3. Bond in the amount of \$1,000
4. Fingerprints
5. Three small wallet size photos
6. If you are working for someone else, you must furnish credentials showing your legal authority to act as a representative for them.

By my signature, I swear (or affirm) that all information provided in this application is true.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
NOTARY SIGNATURE

SUBSCRIBED AND SWORN TO BEFORE ME THIS

\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

NOTARY PUBLIC, COUNTY OF \_\_\_\_\_

STATE OF \_\_\_\_\_

MY COMMISSION EXPIRES ON \_\_\_\_\_

\*\*\*\*\*

APPROVALS:

\_\_\_\_\_  
CHIEF OF POLICE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CITY TREASURER

\_\_\_\_\_  
DATE

## Additional Information for Transient Merchant License

List each location where business will be conducted.

---

---

---

State the name of person having management or supervision of the applicant's business, their local and permanent address.

---

---

List any place, other than the permanent place of business, where you conducted transient business within the last six months.

---

---

What are the nature, character, and quality of items to be sold or offered for sale?

---

---

Will items be sold from stock in possession or will orders be taken for future delivery?

---

---

What is the nature and character of any advertising?

---

---



CITY TREASURER \* INCOME TAX DIVISION  
(517) 483-4121 (517) 483-4114

1<sup>ST</sup> Floor – City Hall  
124 West Michigan Avenue  
Lansing MI 48933

VIRG BERNERO, MAYOR

**LANSING TREASURY INFORMATION REQUEST**

**Complete a separate form for each individual subject to verification**

Applicant/Employee Information

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

Home Address: \_\_\_\_\_

\_\_\_\_\_ Since \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Employer/Business Information

Corporate Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

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

\_\_\_\_\_

Business Phone #: \_\_\_\_\_

Federal Employer Identification #: \_\_\_\_\_

Do you, or any of these businesses, owe the City money for any reason? Yes \_\_\_ No \_\_\_

If Yes, for what reason? \_\_\_\_\_

Name of any other Lansing area business in which your ownership participation exceeds 25% \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date