

6. Have you ever been convicted of any felony, crime or violation of any ordinance other than a minor traffic offense? _____ Yes _____ No

If yes, please provide the time, place, offense, and penalty imposed:

7. Are you a U.S. citizen? _____ Yes _____ No

If yes, but birthplace was not in the U.S., please provide a Certificate of Naturalization, Certificate of Citizenship, or a current passport. If no, please present proof of immigration/employment status.

Section 2: Business Information

8. Describe merchandise being sold:

*** Please attach any literature, flyers or pamphlets that will be distributed**

9. List three most recent cities where applicant conducted business as a solicitor:

10. Days, dates and hours during which soliciting will be conducted:

11. Have you or the firm or business employing you been the subject of an investigation by a consumer protection agency or state attorney general office? _____ Yes _____ No

If yes, please provide the details and locations below:

12. Have you had a solicitor's license/permit denied or revoked by the City or any other government body within three years of the date of this application? _____ Yes _____ No

If yes, please provide the details and locations below:

Notice and Notarized Signature

The Minnesota Data Practices Act requires that we inform you of your rights about the private data we are requesting on this form. Private data is available to you, but not the public. We are requesting this data to determine your eligibility to register as a solicitor in the City of Fosston. Providing the data may disclose information that could cause your application to be denied. You are not legally required to provide the data, however, refusing to supply the data may cause your registration to not be processed. Your signature on this application indicates you understand these rights.

I declare that the information I have provided on this application is truthful, and I understand that falsification of answers on this application will result in denial of the application. I authorize the City of Fosston to investigate and make whatever inquiries are necessary to verify the information.

X _____ Date: _____

Applicant Signature

Subscribed and sworn to before me on this _____ day or _____, _____.

Notary Public

(seal)