



Application Fee: \$75.00
Applicant Fee (per person): \$25.00

TOWN OF DELAFIELD DIRECT SELLER APPLICATION

I. APPLICANT INFORMATION

Name			
Street Address	City	State	Zip
Phone Number	Email		
Driver's License #	Expiration Date		
Vehicle Make and Model	License Plate #		

II. ORGANIZATION INFORMATION

Name of Organization		
Organization Address		
Phone Number of Organization		
Describe the nature of the business to be conducted and goods and services being offered:		
Explain the delivery method of goods being offered (if applicable):		
Last cities, villages, and towns you have conducted business:		
Please list convictions of any crime or ordinance violation related to the applicant's direct seller business within the past 5 years. The nature of the offense and the place of conviction.		
Charge	Location/Date	Disposition
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READ CAREFULLY BEFORE SIGNING: I declare under penalty of law that all of the above information is true and correct to the best of my knowledge and belief. I understand that incomplete or incorrect information may lead to denial of this license. License is valid for 90 days after approval. Laminated licenses must be in plain view when soliciting.		
Signature of Applicant		Date
All applicants must submit a copy of their current driver's license with their completed and signed application.		