



**APPLICATION FOR DIRECT SELLER/SOLICITOR/DISTRIBUTORS LICENSE  
DOOR TO DOOR**

Name of Business \_\_\_\_\_

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

Type of Business \_\_\_\_\_

Business Telephone Number ( ) \_\_\_\_\_ Extension if applicable \_\_\_\_\_

Name of Owner (s) \_\_\_\_\_ Home Telephone ( ) \_\_\_\_\_

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

Local Supervisor(s) \_\_\_\_\_ Home Telephone ( ) \_\_\_\_\_

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

In case of Fire or Police emergency person or persons to be contacted who will be supervising the distributors:

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Location where goods or services are to be sold \_\_\_\_\_

Brief description of goods or services to be sold \_\_\_\_\_

Proposed method of delivery (if applicable) \_\_\_\_\_

Last three communities where the applicant conducted similar activities  
\_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_

**\*Please attach a list of the full name and address of each person who will engage in the sale of goods with the applicant along with the make, model, and license plate # of the vehicles to be used in the selling of the goods. Each solicitor must obtain an ID tag from the City of Allen Park at a cost of \$10.00 per ID. If any of the above or attached information changes please contact the City Clerk's Office.**

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

AMOUNT OF FEE **\$ 500.00** DATE PAID \_\_\_\_\_ STAFF INITIALS \_\_\_\_\_

RECEIPT NO. \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_