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BY: [Signature]



## POLICE INVESTIGATION REPORT AND APPLICATION FOR PEDDLERS, CANVASSERS, SOLICITORS, AND TRANSIENT MERCHANTS LICENSE

Investigation Fee - \$15.00  
Sellers Permit No. \_\_\_\_\_

Receipt No. CC8812657  
Date Paid 8-20-24

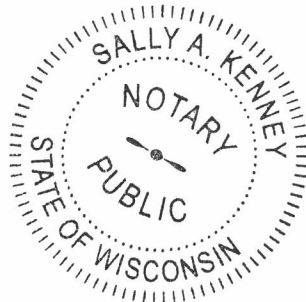
Name of Applicant: <u>Quincy Armon</u>	
Address: <u>209 617th street</u>	
City, State, Zip: <u>Kaukauna, WI, 54130</u>	County of Residence: <u>Outagamie</u>
If less than two years at the above address, please list all addresses in the last two-year period:	
Date of Birth (Month/Day/Year): <u>04-29-96</u>	Place of Birth: <u>Hartford</u>
Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Telephone Number:
Driver's License Number: <u>A6557059-6149-00</u>	
Type of Merchandise or Service: (Please state specific product(s) or actual service provided) <u>Construction Service</u>	
Will you be selling products delivered at sale? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Will you be getting orders for products/services to be delivered in the future? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Location where selling in the City: <u>Kaukauna</u>	
Home Company Name: <u>Armon renovations</u>	
Address: <u>209 E17th Street Kaukauna WI</u>	
Officer or Director of Company: <u>Quincy</u>	Principal Place of Business (State): <u>WI</u>

Reference	Name: <u>Zoey Vyse</u>
	Address: <u>209 E 17th Street</u>
	Telephone Number: <u>920-407-1864</u>
Do you hold a similar license in any other community? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please state where.	

*[Signature]*  
 Signature of Applicant

**STATE OF WISCONSIN OUTAGAMIE COUNTY**

The above signed applicant, being first duly sworn on oath deposes and says that he/she is the applicant named in the foregoing application; that he/she has read each of the questions in said application; that he/she had made complete true and correct answers to each question.



Subscribed and sworn to before me this

20th day of August, 2024

*Sally A. Kenney*  
 City Clerk or Notary Public

**FOR OFFICE USE ONLY**

<b>Police Department Recommendation</b>	Bond Required - Yes <input type="checkbox"/> No <input type="checkbox"/>	
Recommend Approval <input checked="" type="checkbox"/>	Recommend Denial <input type="checkbox"/>	
Signature: <u><i>Brad Savage #305</i></u>		
Explain, if denied:		
<b>City Council Action:</b>	Date granted/denied:	License No.