



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

Investigation Fee - \$15.00

Receipt No. CC9690171

Sellers Permit No. _____

Date Paid 5-27-25

Name of Applicant: <u>Anthony Siebers</u>	
Address: <u>4133 State Road 91</u>	
City, State, Zip: <u>54904</u>	County of Residence: <u>Winnebago</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>05/12/1998</u>	Place of Birth: <u>Appleton</u>
Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Telephone Number: <u>920-5850129</u>
Driver's License Number: <u>S162-0109-9172-05</u>	
Type of Merchandise or Service: (Please state specific product(s) or actual service provided) <u>Telecommunication Services</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>Throughout city</u>	
Home Company Name: <u>TDS</u>	
Address: <u>1490 Oneida St Appleton</u>	
Officer or Director of Company: <u>Daniel Madsen</u>	Principal Place of Business (State): <u>WI</u>

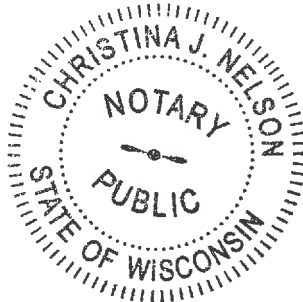
Reference	Name: <u>Daniel Madsen</u>
	Address: <u>1490 Oneida St</u>
	Telephone Number: <u>715-574-7871</u>
Do you hold a similar license in any other community? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please state where.	



Signature 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

27 day of May, 2025

Christina J. Nelson
City Clerk or Notary Public

FOR OFFICE USE ONLY

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