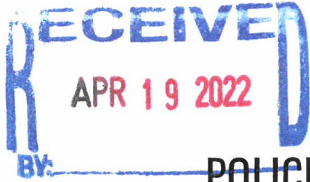


Council 5-3-22

Rec'd from PD 4-27-22



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

Investigation Fee - \$15.00


Receipt No. CC4754131

Sellers Permit No. _____

Date Paid 4-19-22

Name of Applicant: <u>Dylan Deal</u>	
Address: <u>303 Kawbawgam road</u>	
City, State, Zip: <u>Marquette, MI, 49855</u>	County of Residence:
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>02/12/93</u>	Place of Birth: <u>Michigan</u>
Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Telephone Number: <u>906-251-8643</u>
Driver's License Number: <u>460 159 744 113</u>	
Type of Merchandise or Service: (Please state specific product(s) or actual service provided) <u>Pest Control</u>	
Will you be selling products delivered at sale? Yes <input checked="" type="checkbox"/> No <input 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>Turf Budger</u>	
Address: <u>5530 Neubert rd, Appleton, WI 54913</u>	
Officer or Director of Company: <u>Jonas Olsen</u>	Principal Place of Business (State): <u>WI</u>

Reference	Name: <i>N/A</i>
	Address: <i>N/A</i>
	Telephone Number: <i>N/A</i>
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

_____ day of _____, 20 ____.

 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: <i>Bruce Sandquist</i>		
Explain, if denied:		
City Council Action:	Date granted/denied:	License No.