

APPLICATION FOR TRANSIENT MERCHANT LICENSE
CITY OF MARSHALL, MINNESOTA
THROUGH

License Fees: \$30 - Month
\$160 - 6 Months
\$315 - Annual
Due with Application: Minimum Bond Requirement: \$5,000
Receipt No.:

1) Name of Applicant Tivis Laron H
Last First Middle
Address of Applicant 2 W main st Pipestone 56164
Street City State Zip Code
Phone Number: 651 226 2761
Date of Birth of Applicant _____ Social Security Number _____
Drivers License Number _____
Number State
Name of Business (Trade Name) Fish & Chip
Address 112 W main st Pipestone MN 56164
(Street) (City) (State) (Zip Code)
Phone Number 507 213 7326

2) Person(s) to be employed in municipality during the period for which application is made:

a) Jackson ERICAN M 3/12/82
Last First Middle Date of Birth Social Security No.
Drivers License Number _____
51 5th st NW Pipestone MN 56164
Street City State Zip Code
b) TIVIS Laron H 10/9/74
Last First Middle Date of Birth Social Security No.
Drivers License Number _____
112 W main Pipestone MN 56164
Street City State Zip Code

If additional employees, list on separate sheet of paper.

3) Description of Business Food Trailer,
Methods of soliciting Word of mouth, Manus
Goods to be sold Fried fish, fries, milkshakes,
Dates of Soliciting 9/18 - 1/20
4) Place or places in Marshall where applicant will be engaging in their business.
a) _____
b) _____
c) _____

5) License number or numbers of vehicles transporting applicants and their goods:

a) 2024 AB MN c) _____
 Number State Number State

b) BCN553 MN d) _____
 Number State Number State

6) References - including at least one bank or lending institution:

a) Jim Moran 507 825-3344
 Name (If person give First, Middle and Last Name) Telephone Number

P.O. Box 100 Becker MN 56109
 Street City State Zip Code

b) Judith Rodame 281-983-8728
 Name (If person give First, Middle and Last Name) Telephone Number

12707 Bolander Blvd Houston TX 77072
 Street City State Zip Code

c) Mary Washmy _____
 Name (If person give First, Middle and Last Name) Telephone Number

317 4th St SW Pipestone MN 56164
 Street City State Zip Code

7) List 3 municipalities in which applicant has conducted business in the past 12 months:

a) Pipestone MN
 City State

b) Beardron SD
 City State

c) Sioux Falls SD
 City State

COMMENTS: _____

Payment
 Due With
 Application

TITLE OF APPLICANT: Mangano
 SIGNATURE OF APPLICANT: [Signature]

Received by the City Clerk on this 20 day of September, 2019

Signature of the City Clerk [Signature]

REPORT OF DIRECTOR OF PUBLIC SAFETY: _____

DIRECTOR OF PUBLIC SAFETY