



APPLICATION FOR PEDDLER'S LICENSE

Date of Application (mm/dd/yy): _____

Last Name: _____ First Name: _____

Middle Name: _____ Date of Birth (mm/dd/yy): _____

Place of Birth (city and state): _____

Social Security Number: _____

Gender: Male Female

Race: White Black Native American
Asian/Pacific Islander Other (please specify): _____

Height: _____ feet _____ inches Weight: _____ pounds

Hair Color: _____ Eye Color: _____

Phone Number: (____) _____ - _____ Home Work Cell

Home Street Address: _____

City: _____ State: _____ Zip Code: _____

Driver's License Number: _____ State of Issue: _____

Vehicle License Number: _____ State of Issue: _____

Vehicle Registered Owner: _____ Vehicle Color: _____

Vehicle Year: _____ Vehicle Make: _____ Vehicle Model: _____

Employer: _____

Employer Street Address: _____

City: _____ State: _____ Zip Code: _____

Nature of Goods or Services Offered: _____

Length of Service with Present Employer: _____

List a supervisor within the organization who can verify your employment.

Name: _____ Title: _____

Phone Number: (____) _____ - _____ Home Work Cell

Have you ever been convicted of a crime (including misdemeanors, violations of municipal ordinances, juvenile offenses, and vacated convictions)? Yes No

Failure to disclose conviction(s) may result in denial of your application. ** Conviction does not guarantee denial of your application **

If yes, please explain. Be sure to include the nature of the crime and the name of the court in which charges were filed.

Please list two personal references you have known for three or more years.

Name: _____ Years Known: _____

Phone Number: (____) _____ - _____ Home Work Cell

Name: _____ Years Known: _____

Phone Number: (____) _____ - _____ Home Work Cell

I have truthfully and accurately completed this form, and recognize that the peddler's license issued to me by the City of Clyde Hill is non-transferable. Furthermore, I understand that the \$27.00 application fee is nonrefundable.

I hereby authorize the Clyde Hill Police Department to conduct a background investigation and obtain any and all information they may request concerning my work record, military record, criminal record, and general reputation. This authorization is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of such documents, if requested. The information will be used for the purpose of determining my eligibility for a peddler's license.

I hereby release you and your organization from any liability which may or could result from furnishing the information requested above or for any subsequent use of such information in determining my qualifications for the license described. This form or a copy may be retained in your files, and a photocopy will serve as an original.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Applicant Signature: _____ Date: _____

