

CITY OF AFTON SOLICITOR LICENSE REQUEST

License Fee: \$50.00

BUSINESS NAME: _____

Type of Business/Organization: _____

APPLICANT / CONTACT PERSON: _____

Contact Person Phone Numbers: _____

Current Business Mailing Address: *(PLEASE NOTE: If current address is a Post Office Box, a bona fide Street Address is required. Failure to provide a valid address may result in the denial of this application.)*

If address listed is current for fewer than five years, please provide previous address(es):

Provide names and contact information for individuals who will be working in Afton.

Describe items offered for sale OR organization for which you are soliciting funds:

Describe the specific areas in Afton you propose to solicit: *(See Ordinance Sec. 8-59 for prohibitions.)*

Length of time license will be needed: Start Date: _____ **End Date:** _____

Signature of Applicant

Title of Applicant

Date

CITY OFFICE USE ONLY

FEE PAID: _____ CASH: RECEIPT# _____ CHECK: # _____ DATE: _____

AUTHORIZED BY (City Staff Signature): _____ DATE: _____

COPY SENT TO WASHINGTON COUNTY SHERIFF: BY (Staff Initials): _____ DATE: _____

15015 62ND Street North, P.O. Box 3801, Stillwater, MN

INFORMED CONSENT FOR RELEASE OF INFORMATION

I, _____, authorize City of Afton to provide my: full name, previous name(s), date of birth, social security number, driver's license number, home address and previous addresses to the Washington County Sheriff's Office, the Minnesota Bureau of Criminal Apprehension, Department of Driver and Vehicle Services, the National Crime Information Center, Federal Bureau of Investigation, and any other law enforcement agencies with which I have had contact that has records about me, in order to determine my suitability to be issued a peddler's/solicitor's permit from the City of Afton.

I, _____, authorize the Washington County Sheriff's Office, the Minnesota Bureau of Criminal Apprehension, Department of Driver and Vehicle Services, and other law enforcement agencies with which I have had contact, to release any public, private, or confidential information pertaining to my driver's license record, Bureau of Criminal Apprehension records and/or National Crime Information Center records and any and all other offense report records to the City of Afton Department of Human Resources in order to determine my suitability to be issued a peddler's/solicitor's permit from the City of Afton.

I understand that this written consent is valid for one year, but that it may be revoked by me at any time prior to the one year expiration, except to the extent that action has been taken in reliance upon it. I can revoke this consent by filing a written request with the City of Afton Department of Human Resources terminating the consent. I also understand that this data and related criminal history record check is defined by Minn. Stat. § 13.43 as personnel data and shall be treated as such.

Date Executed: _____

Signature: _____

Tennessen Warning: Some or all of the information that you are asked to provide is classified by Minnesota State law as either private or confidential. Private data is information which generally cannot be given to the public, but can be given to the subject of the data. Confidential data is information which generally cannot be given to either the public or the subject of the data.