
Soliciting Activity Information

Name of Business for which you solicit: _____

Address of Regular Place of Business (if any): _____

Telephone Number: _____ **Website Address:** _____

Describe generally the type of commercial items/services/funds for which you solicit:

Length of soliciting activities in the City: _____ **Days/Weeks/Months**
(circle one)

Dates when you intend to conduct soliciting activities in City:

Provide all addresses and telephone numbers to be reached at while conducting soliciting activities in the City:

Address	Telephone

Complete the information below for each person who will be involved in conducting soliciting activities (attach additional sheets if necessary):

Full Name	Date of Birth	Sex	Address, City, State, Zip

List the license plate number, registration information and vehicle identification number for any vehicles used in conjunction with conducting soliciting activities (attach additional sheets if necessary):

License Plate #	State	Make	Model	Year	Color

I AGREE TO CONDUCT SOLICITING ACTIVITIES IN ACCORDANCE WITH THE LAWS OF MINNESOTA AND THE ORDINANCES OF THE CITY OF LAKE CITY. THE FORGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature of Registrant

Date

Subscribed and sworn to before me this
_____ day of _____, 20_____.

Notary Public

My commission expires: _____