

CITY OF SHOREWOOD

SUPPLEMENT INFORMATION TO SOLICITOR/ TRANSIENT MERCHANT APPLICATION

Original Application Date: _____

THE FOLLOWING ADDITIONAL APPLICANT INFORMATION IS REQUIRED:

As indicated in City Ordinance Chapter 308.06, Subd. 2, please provide the Permanent home address and Permanent telephone number of each applicant:

Name: _____
(First) (Middle) (Last)

Permanent Home Address: _____

Permanent Telephone Number: () _____
=====

Name: _____
(First) (Middle) (Last)

Permanent Home Address: _____

Permanent Telephone Number: () _____
=====

Name: _____
(First) (Middle) (Last)

Permanent Home Address: _____

Permanent Telephone Number: () _____

SOUTH LAKE MINNETONKA POLICE DEPARTMENT
24150 Smithtown Road
Shorewood, Minnesota 55331-1913

Office (952) 474-3261
Fax (952) 474-4477

AUTHORIZATION FOR BACKGROUND CHECK

I, _____, hereby grant my informed consent to, and authorize the **South Lake Minnetonka Police Department** to conduct any and all inquiries they deem necessary for a background check to determine my suitability for a Hawkers, Peddlers, Transient Merchants and Canvassers Permit and furnish this information to the City of Shorewood. This may include, but is not limited to, criminal history check, internal records check, jail records, warrants, etc. I hereby release the **South Lake Minnetonka Police Department** from any and all liability for disclosing this public, private and/or confidential information about myself to the City of Shorewood.

Applicant Signature

Date

Print Full Name (*First-Middle-Last*)

Date-of-Birth

Street Address

City State Zip Code

Shorewood Staff Member Requesting Information
(*Print*)

Date

Signature of Staff Member