



TRANSIENT MERCHANT LICENSE INFORMATION

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 EMAIL: LICENSE@MILWAUKEE.GOV
WWW.MILWAUKEE.GOV/LICENSE

LICENSE PERIOD: Issued for the calendar year.

DEFINITION:

A transient merchant means any person, partnership, corporation or limited liability company who engages in the business of purchasing or selling merchandise at any fixed place in the city temporarily and who does not intend to become a permanent merchant of the City of Milwaukee.

EXEMPTIONS:

A Transient Merchant License is not required of any of the following:

- ▶ A person who delivers or sells newspapers.
- ▶ A merchant or merchant's employee who takes orders for or delivers goods at the houses of customers when the goods are held in stock at an established place of business in the city.
- ▶ A person who purchases or sells comic books or collectible toys.
- ▶ A farmer or truck gardener who sells or disposes of, or offers to sell or dispose of, the products of farm or garden occupied and cultivated by the farmer or truck gardener.
- ▶ A licensed food peddler.
- ▶ A registered auctioneer.
- ▶ An artist who offers for sale creations of art or craft, whether paintings, drawings, photographs, pottery, leather goods or similar works of art, provided that such creations may be sold only by the creating artist and only in locations deemed appropriate by Common Council resolution.
- ▶ Any member of a trade show or convention being held at the Wisconsin Center District.
- ▶ Any person, firm or corporation that is selling goods or taking orders on the Summerfest premises with the express written consent of the custodian of such premises.

QUALIFICATIONS: Applicants must be 18 years of age or older.

APPLICATION:

Submit the application, surety bond and license fee to the City Clerk License Division, City Hall, Room 105, 200 E. Wells Street, Milwaukee, WI 53202.

SIGNATURES:

Notarized signature(s) of the individual, all partners, the agent and an officer of a corporation, or the agent and a member of a LLC are required.

FEE: \$140 must be submitted with the application. Checks made payable to: City of Milwaukee. Credit cards are also accepted online and in-person; cash is accepted from applicants filing in person only. When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account, or to process the payment as a check transaction.

BOND/DEPOSIT REQUIREMENT:

A surety bond of \$5,000 is required. See attached bond form. In lieu of a bond, an applicant may submit a certified check in the amount of \$5,000 with the application. The certified check shall be returned to the transient merchant 30 days after the completion of his or her business activity in the city.

BACKGROUND INVESTIGATION:

Upon receipt of the application, it will be referred to the Milwaukee Police Department to complete a background investigation and investigation of the statements made in such application as soon as possible, but no later than 10 days following referral.

The City Clerk shall refuse to register the applicant if it is determined that:

- ▶ The application contains any material omission or inaccuracy.
- ▶ Complaint of material nature has been received against the applicant by authorities in another community where applicant conducted a similar business.
- ▶ Applicant was convicted of a crime or ordinance violation within the past 5 years, the nature of which is directly related to the applicant's fitness to buy or sell under the provisions of this section.

PARTIAL REFUND OF LICENSE FEE: If an application is withdrawn or denied, you are eligible for a partial refund, provided the refund is requested no later than one year from the date of withdrawal or denial of the application. If a license is not issued, the refund must be requested no later than one year from the date of application, unless the license has been granted, in which case no later than one year from the date of granting of the license.

Regulations relating to TRANSIENT MERCHANTS are provided in s. 95-2 of the Milwaukee Code of Ordinances and are available online at <http://www.milwaukee.gov/ordinances>



TRANSIENT MERCHANT LICENSE APPLICATION

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 200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
 (414) 286-2238 E-MAIL ADDRESS: LICENSE@MILWAUKEE.GOV

Check one: Individual or Partnership (Fill out Section A, B, & D)
 Corporation or LLC (Fill out Section B, C, & D)

Section A	<u>INDIVIDUAL OR PARTNER #1:</u> Full Name (Last, First & Middle Initial)	<u>PARTNER #2:</u> Full Name (Last, First & Middle Initial)
	Permanent Street Address:	Permanent Street Address:
	Permanent City, State, Zip Code:	Permanent City, State, Zip Code:
	Home Phone Number: () -	Home Phone Number: () -
	Date of Birth:	Date of Birth:
Section B	Business Name:	
	Business Address (include City, State, Zip Code):	
	Business Phone Number: () -	Local Sale Telephone Number: () -
	Address of Local Sale:	
	Temporary Street Address of Applicant:	
	Temporary City, State, Zip Code	Temporary Telephone Number: () -
	Nature of Business to be conducted: Brief description of the items to be bought, sold, disposed or contracted for, and proposed method of delivery of goods, if applicable:	
	Date(s) of Sale:	
	Will you use a vehicle in your business? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Does your business utilize weighing or measuring devices? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state type and attach certificate from the sealer of weights and measures:	
Have you had a city of Milwaukee license denied or revoked in the past six months? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, for what reason(s)?		
Last location where applicant conducted a similar business:		
Place where applicant can be contacted at least 7 days after leaving the city of Milwaukee:		
Do you have knowledge of the city ordinances currently regulating transient merchants? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Section C	Full Name of Corporation or Limited Liability Company:	
	Agent:	
	Full Name (Last, First & Middle Initial):	Home Phone Number: () -
	Permanent Home Address (include City, State & Zip Code):	Date of Birth:
	President/Member	Vice President/Member
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
	Permanent Home Street Address:	Permanent Home Street Address:
	Permanent City, State, Zip Code:	Permanent City, State, Zip Code:
	Home Phone Number: () -	Home Phone Number: () -
	Date of Birth:	Date of Birth:
	Secretary/Member	Treasurer/Member
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
	Permanent Home Street Address:	Permanent Home Street Address:
	Permanent City, State, Zip Code:	Permanent City, State, Zip Code:
Home Phone Number: () -	Home Phone Number: () -	
Date of Birth:	Date of Birth:	
Section D	<p>The undersigned agrees to inform the City Clerk within five days of any substantial changes in the information supplied in this application. The undersigned shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.</p> <p>I have knowledge of the City Ordinances currently regulating the license applied for herein, and being duly sworn under oath, depose and say that I am the person named above and that all statements made in the foregoing application are true and correct.</p>	
	<p>SUBSCRIBED AND SWORN TO BEFORE ME THIS</p> <p>_____ day of _____, 20_____</p> <p style="text-align: right;">_____ Individual/Partner/Agent/Officer/Member</p> <p style="text-align: right;">_____ Partner(s)</p> <p>Notary Public, State of Wisconsin My commission expires _____</p>	

Office Use Only:

Initials: _____ Filed: _____ License #: _____ Issued: _____

TRANSIENT MERCHANT LICENSE BOND

Bond # _____

Know all by these presents, that we, _____ as Principal and _____, lawfully doing business in the State of Wisconsin, as Surety are held and firmly bound unto the City of Milwaukee, Wisconsin in the penal sum of Five Thousand Dollars (\$5,000.00) for which sum well and truly to be paid, said Principal and Surety bind themselves jointly and severally, firmly by these presents.

Sealed with our seals and dated this _____ day of _____, 20____

The condition of this obligation is such that,

Whereas, the above bounden _____ is desirous of obtaining a license from the City of Milwaukee, Wisconsin to carry on business as **Transient Merchant** in said City of Milwaukee, until the first day in January 20_____, (unless sooner revoked); and Whereas, such license has been granted;

Now, Therefore, if said _____ during the continuance of the license, shall duly comply with the laws of the state of Wisconsin affecting said business, and shall comply with all the requirements of the ordinances of the City of Milwaukee affecting said business, which ordinances are now in effect or may hereafter become effective, then this obligation shall be null and void, otherwise to be in full force and effect.

In presence of:

Signature of Witness

Signature of Principal

Signature of Witness

Signature of Attorney in Fact/Agent

Companies Operating with a Seal, Please Affix

AFFIDAVIT

STATE OF WISCONSIN)
)ss
_____ County)

_____, being first duly sworn, on oath deposes and says that

he/she is Attorney In Fact/Agent of _____,

Surety on the attached bond executed by _____.

Affiant further deposes and says that no officer, official or employee of the City of Milwaukee has any interest, directly or indirectly, or is receiving any premium, commission, fee, or other thing of value on account of the sale or furnishing of said policy.

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

Signature of Attorney In Fact

Notary Public, State of Wisconsin

My Commission expires _____
Notary seal must be affixed