

City of **GRAND HAVEN, MICHIGAN**

SOLICITORS & TRANSIENT MERCHANT APPLICATION

Please return application to:		City of Grand Haven Clerk's Office 519 Washington Avenue Grand Haven, MI 49417 <u>www.grandhaven.org</u> Phone: 616-847-4886 Fax: 616-842-0648			
Fee:	□ \$10/Day	□ \$100/Year	Background (Check Form:	□ \$10/person
Surety I	Bond: □ \$1,000				
Applicant Info	rmation:				
Applicant:Birth Date:				Date:	
	in one applicant, a partne involved in application a ation:				ch a sheet of names
Address of Place o	f Business:				
Phone (1):		Pł	tone (2):		
Employee Inform	nation:				
Employee:					
Address:					
City:			State:	Zip:	
Phone (1):		Pł	one (2):		
Please list and atta	ch information for each	employee that will be	operating as a Sol	icitor or Transie	nt Merchant.
Employer Inform	nation:				
Employer:					
Phone (1):		Ph	one (2):		

Please list and attach credentials establishing the exact relationship with the employer.

Description of Goods to be Sold:

Sale of Any Food Products:

Has the Ottawa County Environmental Health Dept been notified and necessary permits obtained?

Source of Food Purchase and Manner of Sale:

Number of Units or machines and an attached list of their locations

Description of Anticipated Operating Locations

Length of Time for Business Operations:

Vehicle Use

Description of vehicle to be used:

Anticipated route:

Advertising:

Brief statement of the nature and character of the advertising:

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Applicant's Affirmation of Truth and Understanding

The undersigned, by the execution of this application, agrees to conform to all the terms and provisions of the Code of Ordinances of the City of Grand Haven and does represent that he/she has read the forgoing application by him/her signed, and know the contents thereof, and that the same is true of his/her own knowledge, except as to the matters therein stated to be upon his/her information and belief, and as to those matters he/she believes it to be true.

X Applicant Signa	ature	Driver's License #	
X Director of Pub	lic Safety Approval	Date	
Clerk's Use Only	,		
	Application Received	(Date)	
	Public Safety Director Approval	(Initials)	_(Date)
	Application Fee Rec'd(Date)	□ Background Check Fee Rec'_	(Date)
	Bond Received (Date)		
	Health Department Approval (for sale of foo	od) Received (Date)	

SOLICITORS & TRANSIENT MERCHANT RULES AND REGULATIONS

Below, please find the list of rules outlined in Section 26-6 of the Grand Haven Code of Ordinances:

1. Loud noises, speaking devices, lights.

a. It shall be unlawful for any licensee, or any person on the licensee's behalf, to shout, cry, blow a horn, ring a bell, or use any sound device including loud speakers or sound amplifiers, upon any of the streets, alleys, parks or other public places of the city, or upon any private premises for the purpose of attracting attention to any goods, wares or merchandise which the licensee proposes to sell.

b. It shall be unlawful for any licensee, or any person in the licensee's behalf, to use or employ any flashing lights on any vehicle, or any other device for the purpose of attracting attention to any goods, wares or merchandise which the licensee proposes to sell.

2. Business hours.

No solicitor or transient merchant shall engage in business before the hour of 9:00 a.m., or after 7:00 p.m. or sundown, whichever occurs first.

3. Designating off limit locations.

The Main Street Downtown Development District and the entirety of the Waterfront are off limit locations to Solicitors and Transient Merchants. Please see the maps below that describe the off limit areas.

Exceptions:

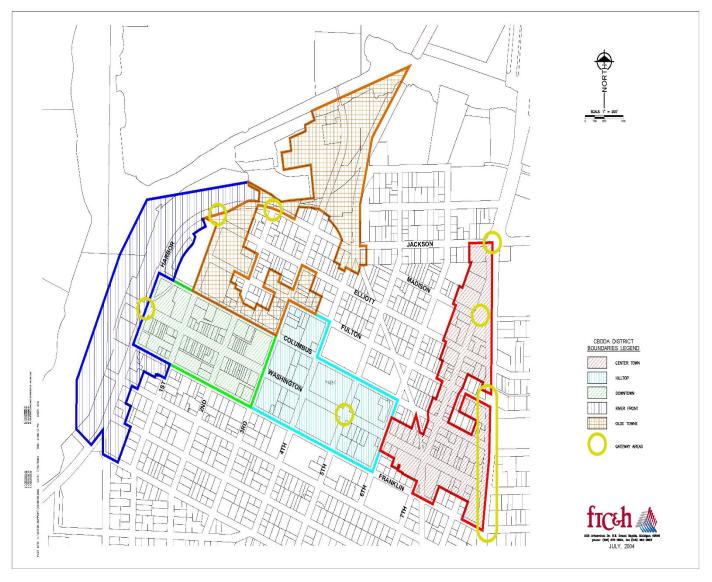
Exceptions to the hours and location may apply to Solicitors and Transient Merchants who are operating with a special event. In order to qualify, Solicitors and Transient Merchants must be included with the special event application.

Revocation:

The City Clerk is authorized to revoke any license issued under this chapter for violation of the provisions of this chapter, upon written notice to the licensee. The licensee may file a written request with the city clerk's office for a hearing to appeal the revocation. The request shall be filed within five (5) days from the date appearing on the notice of revocation. The hearing shall be held by the city manager or the city manager's designated representative. (Section 26-10).

OFF LIMIT LOCATIONS

MSDDA District



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GRAND HAVEN PLEASE PRINT DEPARTMENT OF PUBLIC SAFETY 525 Washington Avenue • Grand Haven, MI 49417 Name: Office 616.842.3460 • Fax 616.847.6050 (Last) (First) (Middle) LAW ENFORCEMENT BACKGROUND CHECK I am making application as indicated below for the purpose of operating a business (Maiden/Alias) or other enterprise within the City of Grand Haven. I understand that my application requires a check of local and/or criminal law enforcement and driving Address: _________________(Street Address, City, State, Zip) records. My signature represents a request to the Grand Haven Department of Public Safety to perform the law enforcement records check indicated. Auction/Auctioneer – Michigan ICHAT & Local Records Check Date of Birth: ____/ ___/ Bed & Breakfast – Michigan ICHAT & Local Records Check Building Mover (Yearly) License - Local Records Check *Driver's License Number: _____ Building Wrecker (Yearly) License - Local Records Check General Permit Application - Local Records Check Going Out of Business Sale Application - Local Records Check Phone Number: Horse Drawn Carriage Business License – Michigan ICHAT & Local Records Check Horse Drawn Carriage Operators License - Michigan ICHAT & Local Records Check Signature: X Junk Dealer License - Michigan ICHAT & Local Records Check Marihuana Facilities - Michigan ICHAT & Local Records Check \square Metal Detectors License - Michigan ICHAT & Local Records Check *A copy of the applicant's driver's license is required Pedicab Business License - Local Records Check Pedicab Operators License - Michigan ICHAT & Local Records Check \square Permanent Liquor License – Michigan ICHAT & Local Records Check Permanent Vendor Application – Michigan ICHAT & Local Records Check (FOR INTERNAL USE ONLY) Solicitors & Transient Merchants License – Michigan ICHAT & Local Records Check Application Received (Date) ______ Sound Truck (Use General Permit Application) - Local Records Check Taxicab Business License - Michigan ICHAT & Local Records Check Taxicab Driver's License - Michigan ICHAT, Driving Record & Local Record Checks Application Fee Received (Date) ____ Taxicab Additional Vehicle to Existing License - Vehicle Inspection □ JUSTICE WAIVER OF LIABILITY AND RELEASE OF CLAIMS □ LERMS I authorize the **GRAND HAVEN DEPARTMENT OF PUBLIC SAFETY** to query and release law enforcement and driving records from all sources. I release □ ICHAT and forever discharge the City of Grand Haven and its agents, officers, and employees from any and all actions, claims and demands for, upon or by reason □ Driving Record of any damage, loss or injury, which may be sustained by me in the nature of libel, slander, invasion of privacy or other results from errors or omissions in the

□ Public Site Search



information given or from the use of the information, whether by reason or

unauthorized use, negligence or otherwise.