

**CITY OF RIVERVIEW**  
**TRANSIENT MERCHANTS LICENSE:**

A 'TRANSIENT MERCHANT' MEANS ANY PERSON ENGAGING IN A TEMPORARY BUSINESS OF SELLING AND DELIVERING GOODS WITHIN THE CITY. IT INCLUDES ITINERANT MERCHANTS AND ITINERANT FLOWER VENDORS.

The application for a Transient Merchant license may be obtained in the City Clerk's Office and must be filled out completely. Each person involved with the business must complete an application and fulfill all the requirements and fees listed below.

<b><u>Fees:</u></b>	<b>License:</b>	<b>\$300.00 per day – per location</b>
	Investigation Fee:	\$ 75.00 per person
	Fingerprinting Fee:	\$ 15.00 per person
	I.D. Cards	\$ 1.00 (3 required)
	Bond	as required

**The non-refundable investigation fee of \$75.00 and the \$15.00 fingerprinting fee** must be paid at the time the application is submitted. Applicant must make an appointment with the Detective Bureau for fingerprinting - 734-281-4215.

The **Transient Merchant license fee of \$300.00 per day – per location** and the **\$1.00 fee for your each of 3 picture I.D. Cards** and the required bond will be due when the license is issued.

**REQUIREMENTS:**

- 1: Written permission from the person who owns the property the transient merchants will be using while in the City including the owners name address and local phone number.
- 2: A list of the exact dates the merchant will be in the stated location. You must notify the City Clerk's Office and the Police Department of any change in location as the license will be issued for one location only.
- 3: A local address and phone number for the transient merchant.
- 4: The address of the last place the applicant conducted a transient business and what it was. We will gather all information available to us concerning the transient applicant. This would include complaints and problems in other cities.
- 6: A statement of the nature, value and quality of the goods to be sold.
- 7: A statement as to what kind of advertising that will be done. We will require copies of any circulars or handbills that will be distributed.
- 8: Credentials from the person for whom the applicant is doing business for, authorizing the applicant to act as his representative.
- 9: **Three (3) recent photographs** (2"x 2" head & shoulder shot) of the applicant, taken within sixty (60) days of filing for this license. The ID card must be worn at all times while working in the City.
- 10: The Transient Merchant license must be posted in plain sight and be presented to any Riverview Resident, business owner or Police Office upon request.

LICENSE # \_\_\_\_\_

EXPIRATION \_\_\_\_\_

**CITY OF RIVERVIEW  
SPECIAL LICENSE APPLICATION**

14100 Civic Park Drive, Riverview, MI 48193 734-281-4240

**Peddler License** \_\_\_\_\_

(door-to-door sales/ice cream vendors)

**Transient Merchant License** \_\_\_\_\_

(selling on street corners or parking lots)

**Solicitor License** \_\_\_\_\_

(taking orders only/flyers door-to-door)

Person: As used in the application, shall mean each and every individual, whether operating in an individual capacity or on behalf of an entity or organization, who engages in sales transactions with the public as Peddler, Solicitor or Transient Merchant. Each Person involved in this business must complete a separate application.

**LICENSES ARE NON-TRANSFERABLE**

Name: (print clearly) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_

Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Sex \_\_\_\_\_

Driver's license number \_\_\_\_\_ Make and Model of Vehicle \_\_\_\_\_

Describe Business: \_\_\_\_\_ Goods sold or orders being taken for:  
\_\_\_\_\_ Magazines/Catalogs \_\_\_\_\_ Candy/Cookies  
\_\_\_\_\_ Flowers \_\_\_\_\_ Other

Dates you are requesting to do business in the City: \_\_\_\_\_

Address of sales sight: (Transient Merchants) \_\_\_\_\_

Employer: \_\_\_\_\_  
Company \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Sales Tax License # \_\_\_\_\_ Federal Tax ID # \_\_\_\_\_

Have you ever been convicted of a crime, misdemeanor or violation of any city ordinance? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, the Charge: \_\_\_\_\_ Court: \_\_\_\_\_ Judge: \_\_\_\_\_

Personal References: Must be Riverview Property Owner or Resident  
Name(s) \_\_\_\_\_ Street Address, City, State & Zip \_\_\_\_\_ Phone # \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Application \_\_\_\_\_

License Fee \$ \_\_\_\_\_  
Investigation Fee \$ \_\_\_\_\_  
Fingerprinting \$ \_\_\_\_\_  
I.D. Card \$ \_\_\_\_\_  
Bond \$ \_\_\_\_\_  
**Total** \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant  
\_\_\_\_\_  
Print Name and Title

# POLICE DEPARTMENT INVESTIGATION

License For: \_\_\_\_\_ (Peddler, Solicitor, Taxicab, etc.)

\_\_\_\_\_  
First Name                  Middle Initial                  Last Name                  Home Phone

\_\_\_\_\_  
Address                          City                  State                  Zip                  Cell or Work Phone

\_\_\_\_\_  
Company Name                  Address                  City                  State                  Zip                  Company Phone

## **POLICE CHECK:**

Criminal Background                  \_\_\_ Approved                  \_\_\_ Disapproved

Driver's Record                  \_\_\_ Approved                  \_\_\_ Disapproved

\_\_\_\_\_  
Explanation, if necessary:  
\_\_\_\_\_

\_\_\_\_\_  
Investigating Officer's Signature

\_\_\_\_\_  
Recommendation: (denied, approved, etc.)                  Date

## **TO WHOM IT MAY CONERN:**

This is to acknowledge that I have waived my rights to privacy and give permission to the City of Riverview to investigate my past, including inquiries as to criminal history records and driving record checks for the purpose of determining my fitness as a \_\_\_\_\_ (type of license) in the City of Riverview.

\_\_\_\_\_  
Applicant's Signature                  Date                  Witness