



Village of Balsam Lake

P.O. Box 506 404 Main Street Balsam Lake, WI 54810
 715-485-3424 Fax 715-485-9339 email clerk@villageofbalsamlake.gov

TRANSIENT MERCHANT APPLICATION – \$10 Investigation fee and \$20 weekly or \$100 for 90 days

Applicants Name:		Applicant Address:	
Applicants Phone Number:		Applicants Email:	
DOB:	Age:	Sex:	Eye Color:
Height:	Hair Color:	Previous Names:	
Business Name and Address:		Product Being Sold or Service Being Offered:	
Business Phone:		Business Email:	
License Number of Vehicle:		State of License:	
Make of Vehicle:		Model of Vehicle:	
Driver's License #:		State Issued:	
<p>Have you been convicted of any crime or ordinance violation related to your transient merchant business within the last five (5) years? If so, what was the nature of the offense and place of conviction:</p>			
<p>State Health Officers Certificate – Where Handling Food or Clothing (Note Must Provide a Copy with Application:</p>			
<p>Dates Business Will Be Conducted:</p>			
<p>Last Municipality where business was conducted:</p>			

I (We), the undersigned, do hereby make application to the Village of Balsam Lake, Wisconsin for a TRANSIENT MERCHANT PERMIT as requested above. I understand that it must be approved by the Village Board and the Police Chief pending Criminal Background Investigation. By signing this application, I understand that my statements are true and that providing false information will result in denial of a permit.

Applicant's Signature Date

Applicant's Signature Date

FOR VILLAGE OF BALSAM LAKE USE ONLY DO NOT WRITE BELOW THIS LINE

Your application for a TRANSIENT MERCHANT PERMIT is **APPROVED**.

Village Clerk Date

Police Chief Date

Your application for a TRANSIENT MERCHANT PERMIT is **DENIED**. The reason for denying your permit application is the following:

Village Clerk Date

Police Chief Date