

Village of Johnson Creek  
 125 Depot Street, P.O. Box 238, Johnson Creek, WI 53038  
 Email: [info@johnsoncreekwi.org](mailto:info@johnsoncreekwi.org) Web: johnsoncreek-wi.us  
 920-699-2296 Phone 920-699-2292 Fax

<b>Office Use</b>
Permit No. _____
Date: _____

## Solicitor's License Application

**(Village Code-Chapter 193: Peddlers, Canvassers and Transient Merchants) \***

<b>Fees:</b>	
Daily	\$ 10.00
Week	\$ 40.00
Month	\$ 100.00
Year	\$ 400.00
Filing Fee	\$ 10.00
<b>Total</b>	\$ _____

Must be paid at the time of filing application; this fee shall cover the cost of investigation for the affective enforcement of this section and the safeguarding of the residents of the Village from fraud, misconduct or abuse. This application must be completed and filed 72 Hours prior to date of use. Fee is non-refundable.

**Required At Time f Application:**

***Copy of Valid Drivers License or picture ID required to file application.***

***Failure to fill out this form in its entirety, omissions or false statement constitute grounds for denial or revocation of any license applied for or issued.***

**Make checks payable to: Village of Johnson Creek**

<b>Selling Dates:</b> _____			
Firm Name _____		Phone _____	
Permanent Address _____			
Street	City	State	Zip

**Please Print**

Applicant's Legal Name _____			
First	Middle	Last	
Home Address _____			
Street	City	State	Zip
Temporary Address _____			
(While in Village) Street City State Zip			
Email address: _____			

Applicant Information for Identification Purpose Only:			
Date of Birth _____	Height _____	Hair Color _____	
Age _____	Race _____	Weight _____	Eye Color _____

