

APPLICATION FOR A TRANSIENT MERCHANT LICENSE

COUNTY FEE: \$150		SURETY BOND: \$1000
THE UNDERSIGNED MAKES APPLICATION FOR A TRANSIENT MERCHANT LICENSE AND SUBMITS THE FOLLOWING STATEMENT OF FACTS AS PROVIDED BY LAW:		
Name of applicant:		
Place(s) of residence for the prior two-year period:		
Business address(es) for the prior two-year period:		
Type of business engaged in for previous two years:		
Proposed place of business:		
Kind of business proposed to be conducted:		
Length of time for which applicant desires to do business:		
The attached is an itemized list of merchandise to be offered for sale. Recite in attached list as to each item a description thereof, including serial number (if any), the owner's actual cost thereof, and a designation by number corresponding with a tag which must be kept fastened to the item at all times until sold.		
Date		Applicant's Signature

APPOINTMENT OF COUNTY AUDITOR-TREASURER AS AGENT		
The undersigned constitutes and appoints Deborah A. Erickson, Administrative Services Director of Crow Wing County, Minnesota, her agent to accept service of process and upon whom service of process may be had in any action to which she is a party arising out of the sale of merchandise for which the license referred to in the preceding application is sought, and service on said agent shall be taken and held as personal service. The appointment shall be and continue in force until all causes of action arising out of such sale shall be barred by the statute of limitations.		
Dated		
Witness:		
Applicant's Signature		

FOR OFFICE USE ONLY		
REQUIRED BOND HAS BEEN FILED IN MY OFFICE IN THE AMOUNT OF:		\$
TERM OF BOND:		TO:
Dated		
(Office signature)		