

NON-REFUNDABLE

PED _____
PTP _____

**CITY OF CUDAHY
APPLICATION FOR A PEDDLER'S LICENSE**

1. APPLICANT:

Name _____

Address _____

Street City Zip

Date of Birth _____ Place of Birth _____

City & State or Country

Social Security # _____ Phone _____

Maiden/Formers Names: _____

Trade Name _____ Phone _____

(If corporation, list name, address & title of each member on back.)

2. DETAILED NATURE OF BUSINESS TO BE CONDUCTED:

3. TYPE OF VEHICLE _____ PLATE NO. _____

STATE OF WISCONSIN)

SS

COUNTY OF MILWAUKEE

_____ being first duly sworn on oath deposes and says that
he/she is the applicant named in the foregoing application and the answers to the above questions
are true and correct.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20____

Notary Public, Milwaukee County, WI
My commission expires _____

Approved by Police Dept. _____ Date: _____