

				HANT LICENSE
			PRIVATE	
mpty store front for the purpo	se of exposi	ng or displaying t	for sale, selling or attemptir	, trailer, boxcar, tent, other portable shelter og to sell, and delivering goods, wares, produ for more than ninety (90) consecutive days.
Applicant Name (First, Middle, Last)				
Home Address				
Phone				
Business Name:				
Business Address:				
Type of Business:				
MN Tax ID Number				
Email Address				
IST OF VEHICLES USED - I	NCLUDING	· I ICENSE NUI	ARED MAKE MODEL VE	AR
	MODE		YEAR	LICENSE
MAKE				

Phone: 763.753.2630

LICENSE PERIOD	From:	То:
HOURS OF OPERATION	From:	То:
DESCRIPTION OF MERCHAND	ISE TO BE SOLD	:
		od Truck – NO FEE
License Fees for Ped	dler/Solicitors	
\$50.00	This license is va	alid for seven calendar days
\$150.00	This license is valid for 30 days	
\$300.00	This license is valid for 30 days	
***PLEASE SUB Applicant Signature:		ATE OF INSURANCE WITH YOUR APPLICATION***  Date:
DATA PRACTICES ADVISOR license. This data is not legall granted, the data will constitu- identify this application in City	RY: The data supp y required but the te a public record. v license files, to ve	olied in this application will be used to assess the qualifications for a City will not be able to grant the license without it. If a license is The data is needed to distinguish this application from others, to earify the identity of the applicant, to contact the applicant if ine if the applicant meets all ordinance requirements.
·	<u>F0</u>	OR OFFICE USE ONLY
BUILDING APPR	OVAL	DATE:
ZONING APPRO	VAL	DATE:
ADMINISTRATIV	E APPROVAL	DATE:

FIRE DEPT. APPROVAL	DATE:
APPROVED BY:	DATE APPROVED:
LICENSE NO.:	RECEIPT NO.:
SPECIAL CONDITIONS:	

## INDEMNIFICATION AGREEMENT THIS DOCUMENT IS REQUIRED IF YOU DO NOT HAVE PROOF OF INSURANCE

TO: City of St. Francis 3750 Bridge St NW St. Francis, MN 55070

The following agreement must be signed and notarized by the owner, authorized partner, or authorized officer(s) of the company. If a partner or officer signs, it must be accompanied by the written authorization of the partnership of the corporation, (such as a corporate resolution or written approval of all partners).

In consideration for the grant of this license by the City of St. Francis, the undersigned licensee agrees as follows:

- 1. OBSERVANCE OF LICENSE AND ALL LAWS. The undersigned shall faithfully observe, keep and obey all terms and conditions of the license or permit, and all laws, rules and ordinances of the City of St. Francis relating to the license or permit, now in effect, including any amendments thereto. The undersigned shall also faithfully observe, keep and obey all laws, rules and regulations of any other governmental entity including county, state and federal regulations which may apply to the license or permit.
- 2. <u>VIOLATION.</u> Upon the violation of any of the terms and conditions of the license or permit, or any other law, regulation or ordinance, the undersigned understands that it may be subject to criminal or civil penalties, including, but not limited to, the suspension or revocation of the license or permit.
- 3. INDEMNIFICATION. The undersigned shall save and protect, hold harmless, indemnify and defend the City, its Council, officers, agents, employees, and volunteer workers against any and all liability, causes of action, claims, loss damage or cost and expense arising from, allegedly arising from, or resulting directly or indirectly from any acts of the licensee or any of its officers, employees, independent contractors or agents done in the performance or operation under this license, or any act done under pretended authority of this license. This agreement to indemnify and hold the City harmless shall include any costs incurred by the City in defending any action involving an act by the licensee or any of its officers, employees, independent contractors or agents, and shall include any attorney's fees incurred by the City.

Name of Licensee (business)	ByOfficer of Corporation or Partner/Owner
tume of Elections (outsiness)	officer of corporation of Farmer owner
TATE OF MINNESOTA )	
COUNTY OF) ss.	
he foregoing instrument was acknowledged	before me thisday of
0by	the
f	on behalf of said
	Notary Public
ESIDENCES OF APPLICANT FOR PA	ST FIVE YEARS:

4. PLEASE NOTE: If the above is left blank, there will be a \$1.00 assessment which will be credited toward the license fee if granted.

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