

City of Grand Mound
615 Sunnyside Street, P.O. Box 206
Grand Mound, IA 52751
563-847-2190
gmcity@gmel.net
www.cityofgrandmound.org

APPLICATION FOR A SOLICITOR'S PERMIT

Name:
Address (Permanent- NO PO BOXES):
Mailing Address:
Phone:
DOB:
SS# or Sales Tax ID #:

Company Soliciting for:
Address of Company:
Phone Number of Company & Direct Supervisor:

Description of merchandise being solicited:

Vehicle Details- Make: Model: Year: Color: License Plate #:

Last three (3) places of business/solicitation. List Name of Town or Place and a contact number
1)
2)
3)

Requested time frame for permit to be valid (Please specify the dates):
___/___/___ through ___/___/___

License fee is \$50.00 per person (Not per company).
Application fee is \$2.00

- **Total Due made payable to the City of Grand Mound \$52.00**
- **A Copy of your State issued photo ID**
- **A copy of your Bond filed with the secretary of state is required prior to the issuance of any permit***

***This license is non-transferable and must be displayed or kept on each person available for inspection by the public. This license is in force & effect only between the hours of 8:00 a.m. and 6:00 p.m.**

I am aware of Section 122 of the City of Grand Mound's Code of Ordinances and agree to abide by those rules. All information I have provided above is true & accurate.

Applicants Signature

Date