

**VILLAGE OF OSCEOLA**  
**APPLICATION FOR REGISTRATION**

Background Check \$25.00

Registration  
\$25/day or \$100/month

Receipt # \_\_\_\_\_

**DIRECT SELLERS PERMIT**

**VILLAGE ORDINANCE #106**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street/Mailing City State Zip

Temporary Address: \_\_\_\_\_  
(if any) Street/Mailing City State Zip

Have you been convicted of any crime or ordinance violation related to direct selling in the last five years? \_\_\_\_\_ If yes, nature and place of conviction: \_\_\_\_\_

**COMPANY REPRESENTING**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street/Mailing City State Zip

Temporary Address: \_\_\_\_\_  
(if any) Street/Mailing City State Zip

Temporary Phone Number (if any): \_\_\_\_\_

Web-site Address: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Nature of business to be conducted and briefly describe goods/services offered: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed method of delivery of goods/services: \_\_\_\_\_  
\_\_\_\_\_

Description of vehicle to be used by applicant:  
Make: \_\_\_\_\_ Year: \_\_\_\_\_ Model: \_\_\_\_\_ Color \_\_\_\_\_ License #: \_\_\_\_\_

Other municipalities where applicant conducted similar business (last 3): \_\_\_\_\_  
\_\_\_\_\_

The below undersigned, appoints the administrator to be his/her agent to accept service of process in any civil action brought against the applicant arising out of any sale or service performed by the applicant in connection with the direct sales activities of the applicant, in the event the applicant cannot, after reasonable effort, be served personally.

\_\_\_\_\_  
Applicant's Signature Date

The following must accompany the APPLICATION FOR REGISTRATION:

1. A driver's license or some other proof of identity.
2. A state certificate of examination and approval from the sealer of weights and measures where applicant's business requires use of weighing and measuring devices approved by state authorities.
3. A state health officer's certificate where applicant's business involves the handling of food or clothing and is required to be certified under state law; such certificate to state that the applicant is apparently free from any contagious or infecting disease, dated not more than 90 days prior to the date of the application for license is made.

I DO HEREBY understand that I, as a Direct Seller, must comply to all rules and regulations of Village Ordinance #106 and that upon the Village Administrator's receipt of my application, it may be turned over to the Chief of Police for his complete investigation. The Administrator shall refuse to register me if it is determined, pursuant to the investigation that: the application contains any material omission or materially inaccurate statement; complaints of a material nature have been received against the applicant by authorities in the last municipalities, not exceeding three, in which the applicant conducted similar business; the applicant was convicted of a crime, statutory violation or ordinance violation within the last five years, the nature of which is directly related to the applicant's fitness to engage in direct selling; or the applicant failed to comply with any applicable provision as stated above.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief of Police

\_\_\_\_\_  
Date

\_\_\_\_\_  
Village Administrator

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Permit #: \_\_\_\_\_ Dated: \_\_\_\_\_ Expiring: \_\_\_\_\_