



APPLICATION CHECK LIST FOR ITINERANT MERCHANTS, VENDORS, SOLICITORS, AND PEDDLERS

- Complete Application Form and pay \$43.00 Application Fee
- Complete Request for Criminal Record Check form.
- Obtain fingerprinting at Department of Public Safety Headquarters, 215 N. New Madrid. Attach completed fingerprint card to application on page provided.
- Submit photograph of applicant (must be at least 2" x 2"). Attach photo to application on page provided.
- Sign Power of Attorney Acknowledgement of Service of Notice of Process form.
- Obtain and submit proof of \$1,000 Surety Bond

**THE APPLICATION PROCESS WILL TAKE A MINIMUM
OF TWENTY-EIGHT (28) DAYS TO COMPLETE.**

Upon Application Approval:

- Pay ID Badge deposit of \$20.00. ID Badge will be issued at City Hall. Upon return of badge within 14 days of expiration of license, \$15.00 will be refunded to applicant.
- Pay applicable license fee:

1 Day	\$2.00
3 Consecutive Days	\$4.00
1 Month	\$8.00
1 Year	\$25.00



**APPLICATION FOR
PEDDLER, SOLICITOR, OR ITINERANT MERCHANT OR VENDORS LICENSE
CITY OF SIKESTON**

Check one: Peddler _____ Solicitor _____ Itinerant Merchant _____
Name of business: (All solicitors and peddlers obtain separate license for each individual)

Applicant: _____

Local Address: _____

Permanent address: _____

Age: _____ Height: _____ Weight: _____ Sex: _____

Vehicle: Description Make/Model _____

License Plate _____

Drivers License # _____

Manager or Supervisor: _____

Address of Manager or Supervisor: _____

Organization represented (all employers) _____

Local address of organization _____

Relationship of organization and applicant _____

Nature of activities of organization _____

Merchandise to be sold: (If farm or orchard products, whether produced or grown by applicant)

Nature of goods or services solicited (invoice value of goods included here) _____

Are goods sold from stock in possession or sample or both _____

What kind of advertising will be done (attach sample of all hand-bills or circulars) _____

Name of manufacturer of goods _____

Address of manufacturer _____

Where are goods located at this time _____

Method of delivery of goods _____

Method of operation _____

Address or Specific places where business is to be carried on _____

Length of time business to be conducted _____

Vehicles used (describe with license number) _____

Has applicant or applicant's manager or supervisor ever been convicted of a crime, misdemeanor, or violation of any municipal ordinance? Give offense and punishment, date and place

Place or places where applicant within six months has conducted transient business

Nature or business within six months _____

**THE APPLICATION PROCESS WILL TAKE A MINIMUM
OF TWENTY-EIGHT (28) DAYS TO COMPLETE.**

FINGER PRINTS

PHOTO

(2 x 2 showing head & shoulders of applicant)

Credentials for the person, firm or corporation for which applicant proposes to do business, authorizing the applicant to act as such representative: _____

\$38.00 filing fee paid to City _____ Date _____
\$20.00 badge fee paid to City _____ Date _____

**THE APPLICATION PROCESS WILL TAKE A MINIMUM
OF TWENTY-EIGHT (28) DAYS TO COMPLETE.**

I hereby authorize the City of Sikeston to investigate my character and my answers to all of the above questions and statements. I certify that all answers and statements made on this application and any attachments are true to the best of my knowledge. I agree and understand that any misstatement of material facts herein is cause for suspension or revocation of license.

Signed: _____

(All partners must sign, and if a corporation, president must sign)

Date of Birth: _____

Social Security #: _____

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

My Commission expires:

Notary Public

STATE OF MISSOURI)
)
COUNTY OF SCOTT)

POWER OF ATTORNEY
ACKNOWLEDGMENT OF SERVICE OF NOTICE OF PROCESS

I, the undersigned, a licensee engaging in business as a peddler, solicitor or itinerant merchant or vendor in the City of Sikeston, Missouri, do hereby designate the City Clerk of the City of Sikeston, Missouri, my true and lawful agent with full power and authority to acknowledge service of notice of process for and on my behalf in respect to any matters connected with or arising out of business transacted by me under my peddler's, solicitor's, or itinerant merchant or vendor's license and the bond posted by me as required by Section VII of Ordinance Number 5594 with respect to said license, for the performance of the conditions of said bond or for any breach thereof. This instrument shall evidence my complete consent and agreement that service of a notice of process may be made upon the City Clerk, and whence so made shall be taken and held to be as valid as if personally served upon this applicant under the aforesaid ordinance, according to the law of the State of Missouri or any other state, and I hereby waive all claim or right of error by reason of such acknowledgment of service or manner of service. I hereby agree to keep the City Clerk of Sikeston, Missouri, informed as to my address for which the said City Clerk may send a copy of any process served upon him/her.

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

Notary Public

My Commission Expires



REQUEST FOR CRIMINAL RECORD CHECK

PLEASE PRINT OR TYPE.

GENERAL INFORMATION

APPLICANT'S LAST NAME FIRST MIDDLE JR / SR

MAIDEN / ALIAS LAST NAME FIRST MIDDLE JR / SR

SEX [] MALE [] FEMALE DATE OF BIRTH (MM/DD/YYYY) SOCIAL SECURITY NUMBER RACE [] BLACK [] WHITE [] INDIAN [] ASIAN [] OTHER

ADDRESS STREET - P.O. BOX CITY STATE ZIP CODE

TYPE OF RECORD CHECK — PROCESSING FEE — METHOD OF PAYMENT

(per Sections 43.527 and 43.530, RSMo.)

[] \$11.00 NAME SEARCH Based on NAME, DATE OF BIRTH, AND SOCIAL SECURITY NUMBER. Response will be returned with all open records and records of conviction. [] \$20.00 FINGERPRINT SEARCH Based on APPLICANT FINGERPRINT CARD. Response will be returned with complete records to the individual or qualifying entity.

Fee is payable either by check or money order (NO CASH) to "State of Missouri, Criminal Record System Fund." Either the Date of Birth OR Social Security Number MUST be provided for processing. For faster processing criminal record checks are available online at: www.machs.mo.gov

MSHP / CENTRAL REPOSITORY RESPONSE



FORWARD TO — SEND REPLY TO

Please forward the request and fee to: Missouri State Highway Patrol Criminal Justice Information Services Division Post Office Box 9500 Jefferson City, MO 65102

SEND REPLY TO (Print or type your mailing label below.)

Telephone (include area code) _____

Three empty rectangular boxes for mailing label information.

Criminal Justice Information Services Division General Information

The Missouri Criminal Records Repository (MCRR), collects, maintains, and disseminates Criminal History Record Information (CHRI) as defined by 43.500 and 589.400 RSMo.

Criminal History Record Information is information collected by criminal justice agencies on individuals consisting of arrests, prosecution, a final disposition, correctional supervision, and release. All felony and serious misdemeanor arrests (referred to as reportable arrests) including offender registration information as defined under 589.400, RSMo. and all alcohol and drug related traffic offenses are reportable to the MCRR.

Criminal history records are designated as open or closed.

- Open records
 1. arrest record for 30 days following arrest.
 2. arrest record for which charges have been filed.
 3. court disposition of guilty.
 4. suspended imposition of sentence during probation period.
- Closed records
 1. arrest record after 30 days following arrest.
 2. nolle prossed.
 3. dismissed.
 4. found not guilty.
 5. suspended imposition of sentence after probation completed.
- Closed records are accessible to certain groups designated in section 610.120, RSMo.
 - MCRR will only release closed records to those noncriminal justice entities entitled to closed records, when the criminal record check is based on a fingerprint search which will assure the identity of the subject in question.
 - Any person can receive their own record, open and closed, by submission of fingerprints and required fee.

Any requester may receive open record information.

Closed records are accessible by the following, in accordance with 610.120 RSMo, with the submission of fingerprints and required fee.

FBI Record requests

- The FBI files are open to criminal justice agencies for the administration of criminal justice.
- The FBI has only open files in that if someone has the authority to receive the records, they receive all that is on file.
- The FBI allows access to their files to noncriminal justice agencies for certain purposes for a fee.
 - The purpose for the record check must be set forth in the federal regulations.
 - The state, from which the noncriminal justice request originates, must have a state statute specifying the entity has state authority to check the FBI files for the purpose specified.
 - Fingerprints must be submitted before the FBI will release their files to a noncriminal justice entity.
 - The result of the federal record search must terminate at a governmental agency and is not to be released to a private entity.
- All requests into the federal file from the state entities must come through and be stamped by MCRR.
- Effective 03-19-2012, Federal record checks for noncriminal justice entities are \$16.50 for licensing and employment checks and \$15.00 for volunteers to those covered care facilities.

PENALTY — A person who knowingly violates any provision of section 43.532, 43.540, 610.100, 610.105, 610.106, or 610.120 is guilty of a class A misdemeanor.