



8040 S. 6th Street
Oak Creek, WI 53154
(414) 766-7000

CITY OF OAK CREEK

TRANSIENT MERCHANT SELLER APPLICATION

REQUEST FOR RECORD CHECK

Fee Schedule:

\$100 Investigation Fee
(payable at time of application)

License No. _____

I authorize the City of Oak Creek Police Department to verify the information on this application for a transient merchant license.

LAST NAME	FIRST	MIDDLE		
CURRENT ADDRESS	CITY	STATE	ZIP	
<i>Applicant's resident address for <u>two</u> years prior to date of application:</i>				
PREVIOUS ADDRESS	CITY	STATE	ZIP	
()	()			
HOME PHONE	CELL PHONE			
DATE OF BIRTH	PLACE OF BIRTH	DRIVER'S LICENSE NUMBER		
MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	RACE _____	HEIGHT _____	WEIGHT _____	
ALIASES USED; MAIDEN NAME; PREVIOUS MARRIED NAMES: _____				

The Oak Creek Police Department will run a record check by driver's license number and will conduct a criminal background check. Juvenile incidents will not appear in the report.

Have you ever been convicted of **any of the following:** (See shaded box below)

- | | |
|-----------------------------------|---|
| a. Felony? | d. Violation of any Wisconsin laws? |
| b. Misdemeanor? | e. Violation of laws of any other states? |
| c. Violation of any federal laws? | f. Violation of ordinances of any municipality? |
- No Yes If yes, state nature of offense(s): _____

Make sure you:

- List any Operating / Driving While Intoxicated (OWI/DWI) convictions.
- List any drug-related convictions.
- List any tickets / citations, including traffic violations, that have been issued to you in any community / state.
- List any misdemeanor (non-felony) arrests / convictions (such as retail theft).
- List any federal charges / convictions (issued by a federal agency) (felony conviction).

Be advised that failure to **accurately and completely** answer the question on the application relating to any law enforcement conviction record you have may result in **DENIAL** of your license.

STATE OF WISCONSIN)
MILWAUKEE COUNTY)

_____, being first duly sworn on oath, deposes and says that he/she is the applicant named in the foregoing application and he/she has read (or had read) each of the said answers in each instance are true and correct.

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

Signature of Applicant

ATTACH PHOTOCOPY OF DRIVER'S LICENSE

Notary Public, Milwaukee County, Wisconsin
My commission expires _____

OMISSION OR FALSIFICATION OF INFORMATION ON THIS APPLICATION IS GROUNDS FOR DENIAL OF A LICENSE.