

Application for Commercial Solicitation License

CASH OR CHECK ONLY!



Original Application
 Renewal License
 # _____

FEES ARE NON-REFUNDABLE

Company License (CLLMS) \$207.00
 Date Recv'd FEB 25 2025
 Total \$ 57.00

Add'l Employee License (CLLME) \$57.00
 Receipt #: 8135 - 1

LICENSE PERIOD IS 6 MONTHS

April 1st - September 30th
 October 1st - March 31st

Note: Please allow 7 business days for application processing

SECTION 1 - COMPANY INFORMATION - Answer all questions completely. Please PRINT clearly.

Name of Company Holding License
Yanda's Dist. LLC

Company Street Address
625 Pine St. City Green Bay State WI Zip 54301

Company Telephone Number
(920) 490-9611 Type of Sales:
 Door to Door Solicitation
 Specific Location in City _____

Company Email Address
ydllc2400@gmail.com

Type of Merchandise of Services - List specific product(s) or actual services being provided:
kirby vacuums; promotional grocery drawing; Carpet cleaning

Contact Phone Number while in the City of Appleton: **[REQUIRED]** _____ Main Employee Contact for Company: **[REQUIRED]**
Jeff Yanda or Jenny Yang

SECTION 2 - EMPLOYEE INFORMATION - Every employee over 18 years of age is required to complete an application form. If employees are minors, you must show proof of State Street Trade Permit pursuant to Wisconsin Act 113.

Name of Employee (First, M, Last)
Kagen Andrew Whiting

Employee Home/Street Address
1245 Oregon St. City Green Bay State WI Zip 54303

Date of Birth _____ Sex Male Driver's License number _____ State Licensed in WI

SECTION 3 - VEHICLE IDENTIFICATION - Vehicle to be used for solicitation purposes

Make of Vehicle Chevy Van Year 1998 Color Maroon License Plate No. AYN 5791 State Licensed In WI

SECTION 4 - PENALTY NOTICE

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.

Signature of Applicant: [Signature]

FOR OFFICE USE ONLY

Date Sent for Approvals <u>FEB 25 2025</u>	Approve: _____	Deny: _____	Date of Recommendation _____	Staff Member _____
POLICE			_____	
CITY SEALER			_____	
Denial Reasoning _____	Date Issued _____	Expiration Date _____	License Number _____	