

## City of Ferndale Peddlers and Solicitors Information and Rate Sheet

In order for any person to peddle goods or solicit orders "door-to-door" within the City of Ferndale, he or she must first obtain a Peddlers and Solicitors License. This document outlines the procedures and fees involved in this process.

- The application form is available at City Hall or on the City of Ferndale website, <u>http://www.cityofferndale.org/clerk/pr/forms/PeddlerSolicitor.pdf</u>.

  It must be completed fully and in writing by the applicant, and submitted to City Hall along with a check or cash in the amount set by the current unified fee schedule of the City of Ferndale to cover the cost of a background investigation and the license fee.
- 2. After the application is submitted and payment received, applicant must make an appointment with the Police Department for a photo, fingerprints and initiation of a background check by calling (360)384-3390. Applicant must bring application form with proof of payment to the appointment.

Fingerprints will be submitted to the Washington State Patrol to check for criminal history. The Police Department will also look for criminal history through various databases and contact references supplied by the applicant. It may take up to 30 (thirty) days to complete the background investigation.

3. If the application is approved, applicant will be notified by City Hall staff and their license will be issued.

## Fees:

Background investigation and fingerprints: \$50

License fees for City Residents:

Yearly license valid for one year from date of issuance: \$20

Bi-Yearly license valid for six months from date of issuance: \$15

Temporary license valid for a period of thirty-one days from date of issuance: \$10

License fees for Non-Residents:

Yearly license valid for one year from date of issuance: \$31

Bi-Yearly license valid for six months from date of issuance: \$26

Temporary license valid for a period of thirty-one days from date of issuance\$20

If any of the following are discovered through the research, the application will be denied: (1) fraud, misrepresentation, or false statements contained in the application for license; (2) conviction of a serious offense as defined in RCW 9.41.010; (3) conviction for offenses related to (a) larceny; (b) assault; (c) fraud; (d) sex offenses; (e) felony drug crimes; and (f) crimes against children and/or vulnerable adults.

If the applicant is denied, the denial shall be made a matter of official record and the reason(s) for the denial will be disclosed to the applicant upon request.

## **RULES AND REGULATIONS**

It is unlawful for any peddler or solicitor, as defined in Chapter 5.20 of the Ferndale Municipal Code, to engage in such activity within the City without first obtaining a Peddlers and Solicitor's License.

Licensees will be given a 90 day grace period in which to renew their expired license at the pertinent periodic rate. Those whose licenses have expired beyond 90 days will be treated as an initial applicant and submitted to a full fingerprint background check and associated fee.

Peddlers and solicitors are required to display the license on their person and in plain view when working, and to offer it for examination at the request of any citizen or police officer.

Peddlers and solicitors shall not attempt to do business at any home, apartment or business that displays a "No Solicitors" or other similar sign, or otherwise provides notice that the occupants do not desire contact.

Peddlers and solicitors shall not engage in business between the hours of 8:00 p.m. and 9:00 a.m., and will not conduct business on any Sunday.

Peddlers and solicitors will not intentionally obstruct vehicular or pedestrian traffic.



## City of Ferndale Application for Peddlers and Solicitors License

| Full Legal Nam   | ne•                       |            |           |            |             |                     |                 |                                       |                         |         |  |
|--|---------------------------|------------|-----------|------------|-------------|---------------------|-----------------|---------------------------------------|-------------------------|---------|--|
| Tun Logar I tan  | ic.                       |            |           |            |             |                     |                 |                                       |                         |         |  |
| Permanent Hon  | ne Address:               |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| Phone Numbers(s):  |                           |            |           |            |             | Email Address:      |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| Date of Birth:   | Social Security No.       | Race       | Sex       | Hgt.       | Wgt.        | Hair                | Local Addre     | ess:                                  |                         |         |  |
|  | •                         |            | 1         |            |             |                     |                 |                                       | isla or other proof the |         |  |
| Name/Address of Employer or Parent Organization you are representing. (Attach a copy of your credentials or other proof that you are working on behalf of this company.) |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| are working on benan of this company.)   |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| Briefly describe the nature of your business and the goods and/or services you are selling.  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| biterry describe the nature of your business and the goods and/or services you are senting.  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| If for future delivery, where is your product produced?  |                           |            |           |            |             | re is you           | r product at ti | me of sale?                           |                         |         |  |
|  | -                         |            |           |            |             |                     | -               |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| How will your product be delivered to the customer?  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| TT   | 1                         | .1         |           | (in        | 1 4in a     | ·fc of              | C2) If w        | · · · · · · · · · · · · · · · · · · · |                         | 1:      |  |
| Have you every been convicted of a felony or misdemeanor (including traffic offenses?) If yes, supply complete details including   |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| city, county and state in which you were arrested, and court dispositions.   |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| Supply the nam   | nes, addresses and phor   | ne numbe   | ers of tw | o persona  | al or bus   | siness ref          | erences         |                                       |                         |         |  |
| 1.   | 1                         |            |           | 1          |             |                     |                 |                                       |                         |         |  |
| -  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| 2.   |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
| Supply description and license number of any vehicle(s) you will be using while peddling/soliciting in Ferndale  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  |                           |            |           |            |             |                     |                 |                                       |                         |         |  |
|  | application, I am auth    |            |           |            |             |                     |                 |                                       |                         |         |  |
|  | n State Patrol for a crim |            |           |            |             |                     |                 |                                       |                         |         |  |
|  | or conviction of certain  |            |           |            |             |                     |                 |                                       |                         | orth in |  |
| Ferndale Munic   | cipal Code, Chapter 5.2   | 20. I unde | erstand t | hat violat | tion of the | nese term           | ns may result i | in revocation                         | n of my license.        |         |  |
|  |                           |            |           |            |             | 000                 | TT 0::1-:       |                                       |                         |         |  |
|  |                           |            |           |            |             |                     | Use Only        | D .                                   | D                       |         |  |
| Signature  |                           |            |           |            |             | nt.Receive          |                 | By:                                   | Receipt #:              |         |  |
| Signature  |                           |            |           |            |             | ints Maile          |                 |                                       |                         |         |  |
|  |                           |            |           |            |             | cals Chec           | скеа:           | DOI.                                  |                         |         |  |
| Date   |                           |            |           |            |             | S520:<br>ints Retur | 1.              | DOL:                                  |                         |         |  |
|  |                           |            |           |            | 1 110       | nts Ketu            | rnea:           |                                       |                         |         |  |