CITY OF SHOREWOOD

SUPPLEMENT INFORMATION TO SOLICITOR/ TRANSIENT MERCHANT APPLICATION

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(First) ermanent Home Address: ermanent Telephone Number:((Middle)		

SOUTH LAKE MINNETONKA POLICE DEPARTMENT

24150 Smithtown Road Shorewood, Minnesota 55331-1913

BRYAN T. LITSEY Chief of Police Office (952) 474-3261 Fax (952) 474-4477

AUTHORIZATION FOR BACKGROUND CHECK

Ι,		, hereby grant my informed consent
to, and authorize	the South Lake Minnetonka	Police Department to conduct any and all
inquiries they de	em necessary for a background	check to determine my suitability for a
Hawkers, Peddle	ers, Transient Merchants and C	anvassers Permit and furnish this
information to th	ne City of Shorewood. This ma	y include, but is not limited to, criminal
history check, in	ternal records check, jail record	ds, warrants, etc. I hereby release the
South Lake Mir	anetonka Police Department	from any and all liability for disclosing
this public, priva	te and/or confidential informat	ion about myself to the City of
Shorewood.		
Applicant Signature		Date
Print Full Name (First-Middle-Last)		Date-of-Birth
		
Str	reet Address	
City	State Zip Coo	de
Shorewood Staff Member Requesting Information (Print)		tion Date
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Sigi	nature of Staff Member	