



Direct Seller License Information

ccl-dsel 7/10/14

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license

Who needs a Direct Seller License?

Any person who sells goods or takes sales orders for the later delivery of goods on any public way or other public premises, and includes peddlers or solicitors.

Exemptions

- Transient merchants engaging in the business of purchasing or selling merchandise at any fixed place in the city temporarily who do not intend to become and do not become permanent merchants.
- Permanent merchants conducting temporary sidewalk cafés.
- Food peddlers regulated under Ch. 74
- Any person reselling tickets to entertainment or sporting events at or below face value.
- Any person engaged in the activity of “busking”

See Milwaukee Code of Ordinances 95-2 for a complete list of exemptions.

Eligibility

Must be 18 at the time of application

Fee

\$129

Fee Exemption

The license fee will be waived for any veteran of the armed forces in the U.S. in any way who has a 25% disability or more, has a cardiac disability recognized by the U.S. veterans administration, and any person disabled to the extent of the loss of one arm or one leg or more, or who has been declared blind as defined under Title 16 of the Social Security Act.

Proof of such disability must be presented to the City Clerk License Division.

License Period

License expires 1 year from date of issuance.
License must be issued within 1 year of approval, or a waiver from the Licenses Committee is needed.

Forms Needed

- Individual Application (ccl-iaap)
- Supplemental Application for Direct Seller’s License (ccl-dsel1)

Certificate of Insurance Required

All direct sellers selling or offering for sale goods from a pushcart, stand, table, container, or other stationary apparatus located on the public way must have in force at all times general liability insurance.

A Certificate of General Liability Insurance with the City of Milwaukee named as an additional insured is required. Coverage must be, at a minimum, a combined single limit of \$100,000 per occurrence. The certificate must provide 30 days written notice to the City upon cancellation or nonrenewal or material change in the policy.

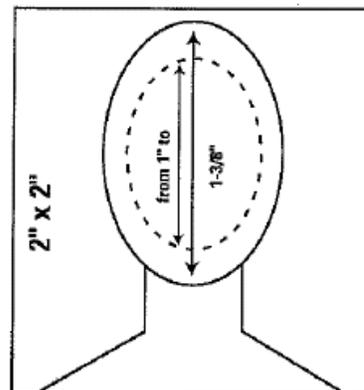
Your Direct Sellers License will not be issued until a valid Certificate of Insurance meeting the requirements stated above is on file in the City Clerk License Division office.

EXCEPTION:

Direct sellers selling goods from a vehicle do not need to provide proof of insurance.

Photograph

Submit one recent passport size photograph with application: see figure below.



Seller's Permit

All applicants must provide proof that they hold a Wisconsin Seller's Permit before the license will be issued. This is obtained from the Wisconsin Department of Revenue, 819 N. 6th St, Room 408, (414) 227-4000, www.dor.state.wi.us/.

In place of a seller's permit, an applicant may provide written permission from their employer to utilize the employer's Wisconsin Seller's Permit (Form ccl-128h may be requested from our office).

Denial/Revocation

If the Common council denies a license due to a police record, no applicant can reapply within 12 months of the date of denial.

Sales on Public Right of Way/Special Events

It shall be unlawful for any person to sell, or offer to sell, any goods, merchandise, foodstuffs, tickets, or any other article of any kind on any public street or public sidewalk within 500 feet of the right of way for special events.

No direct seller is permitted to sell or offer for sale any item while on a roadway, median or safety island, unless the roadway has been legally closed to traffic for a parade, festival, or other civic/special event.

City of Milwaukee Ordinance Regulations

- MCO 95-1, 105-56, 115-45
- Available online at www.milwaukee.gov/ordinances



DIRECT SELLER SUPPLEMENTAL APPLICATION

ccl-dsel1 1/21/14

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license e-mail: license@milwaukee.gov

Print Name: _____

Age: _____	Height: _____	Weight: _____	Hair Color: _____	Eye Color: _____
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Are you a 25% disabled veteran? No Yes (If yes, written proof must be provided to waive fee)

BUSINESS OPERATIONS INFORMATION

Wisconsin State Seller's Permit Number: _____

Provide a brief description of:

- goods being sold: _____
- nature of business to be conducted: _____
- any services offered: _____

Method of delivery of goods: obtained at time of purchase by mail
 later delivery of goods Other: _____

Name and address of any person, firm or organization you represent: _____

Check all items which will be used:	Provide the size and description:
<input type="checkbox"/> Stand/Booth/Kiosk	
<input type="checkbox"/> Table	
<input type="checkbox"/> Container	
<input type="checkbox"/> Pushcart	A photograph or accurate graphic representation of the pushcart must be submitted with the application.
<input type="checkbox"/> Other stationery apparatus	
<input type="checkbox"/> Vehicle	Year: _____
	Make: _____
<input type="checkbox"/> None of the above	Model: _____
	License #: _____

OUT OF STATE RESIDENTS ONLY

Local Address (include city, state, zip code): _____	Phone # _____
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Name the last three cities in which you have conducted business:

- 1 _____
- 2 _____
- 3 _____

Where can you be reached within 7 days of leaving Milwaukee: _____

I am appointing the City Clerk as agent to accept service of process in any civil action brought against me arising out of any sale or service performed by me in connection with my direct sales activities.

I indemnify and hold harmless the City, its employees and agents against any and all claims, demands, costs, damages, expenses or liability of any kind incurred because of any damages or injuries resulting from the activities for which the license is granted.

Signature: _____

DIRECT SELLER

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CERTIFICATE OF INSURANCE

Insurance Company Name: _____

Insurance Company Address (including city, state, zip): _____

Insurance Company's State of WI License # _____ (optional)

ISSUED TO THE CITY OF MILWAUKEE, 200 E. Wells Street, Rm. 105, Milwaukee, WI 53202

The company hereby certifies that it has issued to: _____

General Liability Policy No. _____ Effective _____ and

Expiring _____, providing for a combined single limit of \$100,000 per occurrence.

Said policy provides that notwithstanding any other provision therein, 30 days written notice of cancellation, material change, expiration, or intent not to renew will be given to the City Clerk of the City of Milwaukee; otherwise such insurance as is afforded thereunder shall remain in full force and effect.

Dated this _____ day of _____, 20_____

Signed _____
Agent of Insurance Company

Date: _____

To: License Division
City of Milwaukee

_____ is an employee of _____
Name of Employee Employing Company
and has permission to use the company's seller's permit number (a copy of
which is attached) for the purpose of obtaining a Direct Seller's license.

SUBSCRIBED AND SWORN BEFORE ME ON

_____ day of _____, 20_____

Printed Name of Owner of Employing Company

Notary Public, State of Wisconsin
My commission expires _____

Signature of Owner of Employing Company

(Notary Seal must be affixed)