



City of Robbinsdale

4100 Lakeview Avenue North • Robbinsdale, Minnesota 55422-1898
Phone (763) 531-1255 • Fax (763) 537-7344

Application for Door-To-Door Solicitation (Non-Profit)

Date: _____

Name of Organization: _____

Business Address: _____

Type of Business: _____

Contact Name: _____ Phone Number: _____

Minnesota Business ID Number _____

License Period: From: _____ to _____ Number of Days: _____

Hours of Solicitation: _____ to _____

Attach a list of the name, address and date of birth of all persons associated with this solicitation:

Attach proof of non-profit status.

Attach sample of promotion materials.

DATA PRACTICES ADVISORY: The data supplied in this application will be used to assess the qualifications for a license. This data is not legally required, but the City will not be able to grant the license without it. If a license is granted, the data will constitute a public record. The data is needed to distinguish this application from others, to identify this application in City license files, to verify the identity of the applicant, to contact the applicant if additional information is required and to determine if the applicant meets all ordinance requirements.