STATE OF MAINE
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION
OFFICE OF LICENSING AND REGISTRATION
INDIVIDUAL LICENSE APPLICATION

APPLICANT INFORMATION (please print)			
FULL LEGAL NAME	FIRST	MIDDLE INITIAL	LAST
ANY OTHER NAMES EVER USED:			
DATE OF BIRTH mm / dd / yyyy		SOCIAL SECURITY NUMBER - -	
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
PHONE # ( )	FAX # ( )	E-MAIL	

CRIMINAL BACKGROUND DISCLOSURE

NOTE: Failure to disclose criminal convictions may result in denial, fines, suspension and/or revocation of a license.

1. **Have you ever been convicted by any court of any crime? (circle one) NO YES**
   If yes, enclose a detailed description of what happened (including dates) and a copy of the court judgment.
2. **Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure? (circle one) NO YES**
   If yes, enclose a detailed explanation and copies of all documents.

By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Licensing and Registration will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.

SIGNATURE **DATE**

Transient Sellers Program: Employee Application
Required Fee: $121.00 (includes criminal records check fee) or $75.00 if renewal

LICENSE TYPE:

☐ TRANSIENT SELLER - EMPLOYEE (*EM1421*)

Office Use Only:
1421 - $75.00
1427 - $75.00
1446 - $25.00
2619 - $21.00
2090 - $50.00

Office Use Only:
Check #_____
Amount:_____
Cash #_____
Lic. #_____
Issue Date_____
Exp. Date_____

PAYMENT OPTIONS:

Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:

NAME OF CARDHOLDER (please print) FIRST MIDDLE INITIAL LAST

I authorize the Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my

☐ VISA ☐ MASTERCARD the following amount: $_____

Card number: XXXX-XXXX-XXXX-XXXX Expiration Date mm / yyyy

SIGNATURE **DATE**

STATE OF MAINE DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION - OFFICE OF LICENSING & REGISTRATION
Mailing Address: 35 State House Station, Augusta, Maine 04333 **Courier/Delivery address**: 122 Northern Avenue, Gardiner, Maine 04345
Phone: (207) 624-8603 Fax: (207) 624-8637 Hearing Impaired: (888) 577-6690 web: www.maine.gov/professionallicensing

Frequently Asked Questions:

- **Where do I send my application?** Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- **Where are you located?** 76 Northern Avenue, Gardiner, Maine.
- **What hours are you open?** 8:00 AM to 5:00 PM weekdays
- **Can I come to Gardiner to drop off my application?** Yes. You will not leave with a license, though.
- **Can I come to Gardiner to pick up my license?** No. Your license will be mailed to you.
- **How long does it take to process an application?** You can check our website: www.maine.gov/professionallicensing. Your license will show up as PENDING at first; as soon as your status is ACTIVE you are authorized to practice.
- **How far back do I go answering the criminal question?** Any conviction, ever.

What if I have other questions? Visit our website at: http://www.maine.gov/pfr/professionallicensing/professions/transient_sellers/ or contact Marlene McFadden, Office Specialist I, Tel. 207/624-8624, e-mail: Marlene.M.McFadden@Maine.gov or Elaine Thibodeau, Program Administrator, Tel 207/624-8617, e-mail: Elaine.M.Thibodeau@Maine.gov

NOTICES

BACKGROUND CHECK: Pursuant to 5 M.R.S.A. §5301 - 5303, the State of Maine is granted the authority to take into consideration an applicant's criminal history record. The Office of Licensing and Registration requires a criminal history records check as part of the application process for all applicants.

PUBLIC RECORD: This application is a public record for purposes of the Maine Freedom of Access Law (1 MRSA §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

SOCIAL SECURITY NUMBER: The following statement is made pursuant to the Privacy Act of 1974 (§7(B)). Disclosure of your Social Security Number Is mandatory. Solicitation of your Social Security Number is solely for tax administration purposes, pursuant to 35 MRSA §175 as authorized by the Tax Reform Act of 1975 (42 USC §405(C)(2)(C)(1)). Your Social Security Number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your Social Security Number and it shall be treated as confidential tax information pursuant to 36 MRSA §191.

Before you seal the envelope, did you:

- Complete every item on the application (incomplete applications may be returned)
- Answer the criminal background disclosure questions
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) *or* credit card information (plus signature)
- Include any required transcripts or exam results
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.

EMPLOYER / COMPANY INFORMATION

You cannot become licensed as a Transient Seller Employee unless / until your employer has first become licensed as a Transient Seller Company.

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Transient Seller Company Name:

_____

Company License #: CO_____

Owner (s) of Company:

_____

_____

_____

_____

Mailing Address:

Street: _____

City: _____ **County:** _____

State: _____ **Zip Code:** _____ **-** _____

Telephone #: (_____)_____-_____

E-mail address:

_____@_____

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_____ _____/_____/_____

Signature of Authorized Agent of Company **Date**

_____

Typed or Printed Name of Authorized Agent

REGULATIONS

Please read the laws governing the licensure and practice of Transient Sales prior to submitting your application. These are available at the following website:

http://www.maine.gov/pfr/professionallicensing/professions/transient_sellers/laws.htm

SCOPE

"Transient seller of consumer merchandise" or "transient seller":

- Means any person who engages in the business of selling merchandise to consumers by means of personal contact or telephone contact, whether or not the seller is present in the State at the time of the contact or the time of sale, and who does not have, for the purposes of carrying on such business, any permanent place of business within this State. "

- It does not does not include a person who sells at public fairs, expositions or bazaars or a member selling on behalf of public service organizations.

- It does not include a person who sells exclusively by mail contact, except for a person who offers merchandise or money prizes as free of charge, such as contest prizes or gifts for answering a survey, but who requires the recipient to pay something of value in order to participate in this offer, including, but not limited to, entrance fees, processing fees or handling charges.

FINANCIAL PRODUCTS

Your Transient Seller license does not permit you to sell products for which product-specific licensure, registration or certification is required. If your product is a financial service (e.g., credit cards, credit monitoring service, student loan consolidation, debt management service, offer of insurance, investments, financial advice), then please contact the appropriate agency of the Maine Department of Professional & Financial Regulation for additional information:

Bureau of Consumer Credit Protection
Website: http://www.maine.gov/pfr/consumercredit/

Bureau of Financial Institutions
Website: http://www.maine.gov/pfr/financialinstitutions/

Bureau of Insurance
Website: http://www.maine.gov/pfr/insurance/

Office of Securities
Website: http://www.maine.gov/pfr/securities/

DISCLOSURES TO CONSUMERS

- Every time a transient seller of consumer merchandise advertises in this State for the sale of merchandise, whether in print or electronic media, the advertisement must disclose the transient seller's license number in the following manner: "State Department of Professional and Financial Regulation Transient Seller's License Number: (Fill in number)" and must disclose the address of the seller's permanent place of business.

- Every transient seller of consumer merchandise and each of the seller's employees must have a valid license, as required by this subchapter, in the seller's or employee's immediate possession at all times when engaging in sales of consumer merchandise in this State and shall present the license for inspection upon request of any person.

- Every time a transient seller of consumer merchandise sells merchandise to a consumer in this State, the transient seller shall provide the purchaser with a written receipt, at the time of sale, disclosing the transient seller's license number in the following manner: "State Department of Professional and Financial Regulation Transient Seller's License Number: (Fill in number)" and disclosing the transient seller's name and permanent place of business.