

TRANSIENT MERCHANT/VENDING PERMIT <u>APPLICATION</u>

APPLICANT'S NAME:	TYPE OF PERMIT REQUESTED
	Transient Merchant
	Vending on Public Property
	Annual Monthly 3 day
RESIDENCE ADDRESS:	MAILING ADDRESS:
TELEPHONE (PERMANENT)	MESSAGE PHONE/CELL
DATE OF BIRTH	DRIVER'S LICENSE #
DATE OF DIKTI	
	STATE OF ISSUE:
DESCRIBE NATURE OF BUSINESS	INDICATE DAYS AND HOURS OF
AND GOODS TO BE SOLD:	OPERATION:
New Used Auction Seasonal	
ADDRESS TRANSIENT BUSINESS	LAST FOUR (4) PLACES TRANSIENT
WILL BE LOCATED:	BUSINESS HAS BEEN LOCATED:
	1.
	2.
	3.
	4.
PROPERTY OWNER'S SIGNATURE	I hereby swear that the above information
AUTHORIZING PERMISSION:	is true and accurate to the best of my
AUTHORIZING LERMISSION.	ability.
	ability.
Gianatura	
Signature	Annligent's Signature Data
	Applicant's Signature Date
Printed Name/Title Date	
ANY PERSON, FIRM, OR CORPORATION VIOLATING ANY OF THE PROVISION OF	CITY APPROVAL
THIS ORDIANCE SHALL, UPON CONVICTION	Planning
THEREOF, BE PUNISHED BY A FINE NOT TO	
EXCEED \$500.00.	Police Dept
	City Manager