

PEDDLER'S PERMIT  
(See attached Codified Ordinance)

\_\_\_\_\_  
Name of Solicitor                      Date of Birth                      Social Security Number

\_\_\_\_\_  
Address                      City                      State                      Zip

\_\_\_\_\_  
Phone Number                      Drivers License Number

\_\_\_\_\_  
Description of Product Sold

\_\_\_\_\_  
Supervisor/Owner Name                      Address                      Phone

Name 4 cities that have issued permits to you and when:  
\_\_\_\_\_  
\_\_\_\_\_

Method of Collection: \_\_\_\_ Cash \_\_\_\_ Check \_\_\_\_ Credit Card

Have you ever been arrested for any violation other than traffic? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

When: \_\_\_\_\_ Where: \_\_\_\_\_

Remarks/Information: \_\_\_\_\_

Permit Valid for 7 days: \_\_\_\_\_ Approved/Refused \_\_\_\_\_

If refused, Why? \_\_\_\_\_ Permit Expiration Date \_\_\_\_\_

Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_ Bond Required: Yes/No \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant                      Ben Garlich, Mayor

\_\_\_\_\_  
Date Approved                      Police Department