

CITY OF HOHENWALD

MOBILE VENDOR APPLICATION

Complete Business Name and Location

Name _____

Street _____

City _____ State _____ Zip _____

Mailing Address (If different from Location)

Street or P.O. Box _____

City _____ State _____ Zip _____

Name and permanent address of person who will make sales of solicitations within the city. If more than one person please attach the list to this sheet.

Name _____

Permanent Street Address _____

City _____ State _____ Zip _____

Business Telephone Number (Include Area Code)

Name, address (Street, State, and Zip Code) and telephone number of Owner.

Description of merchandise offered for sale:

List and description of any trailers, tents, or other setup materials being used:

THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. (This application must be signed by the individual/owner, or by a partner, or by an officer or representative of the company, business, organization, or corporation listed above)

Print Name of Representative

Signature of Representative

Title

Driver License Number

Date Applied

FOR DEPARTMENT USE ONLY

Type of Permit: Peddler Transient Vender Solicitor Street Barker
 Solicitor for Charitable or Religious purpose Solicitor for Subscriptions

License or Permit No. _____ Date Issued _____ Expiration Date _____