

**PEDDLER/SOLICITOR
PERMIT APPLICATION**

NAME _____ **DATE** _____

ADDRESS: _____

TELEPHONE: _____

DESCRIPTION OF VEHICLE: _____

VEHICLE LICENSE: _____

COPY OF DRIVERS LICENSE:

NATURE OF BUSINESS AND GOODS:

EMPLOYER:

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

**PEDDLING AND SOLICITING MONDAY THROUGH SATURDAY BETWEEN
THE HOURS OF 10:00 AM AND 8:00 PM ONLY!**

APPLICANT SIGNATURE

FEE PER PERSON: _____ **PERMIT NUMBER:** _____

___ **ONE DAY \$3.00** ___ **ONE WEEK \$10.00** ___ **ONE MONTH \$15.00**

___ **ONE YEAR \$30.00**

TOTAL FEE: _____

GOOD FOR YOU, PLATTSBURG!