

**TOWN OF MCCANDLESS
TRANSIENT VENDOR/SOLICITATION PERMIT**

All applications must be legible. If additional space is required, please use another sheet of paper and attach it to this application. All statements are subject to verification and incorrect statements will bar you from obtaining a permit or identification card or will constitute grounds for later cancellation of the permit or identification card.

APPLICANT INFORMATION

Name of Applicant	
Address	
City	
State	
Zip Code	
Telephone Number (Primary)	
Telephone Number (Mobile)	
Social Security Number	
Sex (male/female)	
Height	_____ ft. _____ inches
Weight (approximate)	_____ lbs.

VEHICLE INFORMATION

Driver's License	State	Number
Vehicle Registration	State	Number

BUSINESS OR EMPLOYER INFORMATION

Employer/Business Name	
Manager/Supervisor's Name	
Address	
City	
State	
Zip	
Telephone Number (Primary)	

EXPLAIN the merchandise to be sold, Source of Supply, type of transaction to be conducted and method of delivery.

Requested Dates of Operation: _____

**Hours of Operation (Specify Hours):
HOURS OF OPERATION ARE
BETWEEN 9 AM to SUNSET**

PERMIT FEE (S)	Amount
Vendor Fee (\$100.00/45 days)	
Additional Vendor Fee (each additional person with group) (\$25.00/each)	
Background Check (Non-refundable Fee) (\$40.00/each) (each additional person with group)	
TOTAL	

REFERENCES (List 3, required)

Name	Address	Telephone Number

- I certify that there are no willful misrepresentations in or falsifications of the above statements and answers to questions.
- I am aware that any falsehoods or misrepresentations will bar me from obtaining a permit or identification card or constitute grounds for later cancellation of the permit or identification card.
- Solicitations on private commercial property – applicant is required to obtain written, notarized permission from the property owner prior to permit approval.
- The applicant must attach a legible photocopy of State or Federal Photographic Identifications (i.e. Valid Driver’s License, State Identification or Passport).
- The applicant must attach (2) two photographs approximately one inch by one inch, showing head & shoulders.
- I understand that I am not permitted to conduct business within a zoning buffer or within 10 (ten) feet of the cart way in the absence of a zoning buffer. I understand that I am prohibited from conducting business within any right-of-way.

Signature of Applicant

Date

Approved by the Town of McCandless Police Department:

Chief of Police

Date

FOR OFFICE USE ONLY			
Application Received:	_____	Permit Issued:	_____
Payment Received:	_____	Permit Number:	_____