



CITY OF DAYTON - 111 N CHURCH ST - DAYTON, TX 77535 - 936.258.2642

## SOLICITOR/PEDDLER PERMIT APPLICATION

**SOLICITOR:**

Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Local Address: \_\_\_\_\_

Company/Business Name: \_\_\_\_\_ Contact: \_\_\_\_\_

**NAME/NUMBER OF DIRECT SUPERVISOR:** \_\_\_\_\_

Tx Sales Tax Id#: \_\_\_\_\_ Bond Insurer: \_\_\_\_\_

(Attach A Copy)

Solicitors D.O.B: \_\_\_\_\_ SS#: \_\_\_\_\_

Texas Dept. Health Current Health Permit: Yes / No DL# \_\_\_\_\_ State: \_\_\_\_\_

**VEHICLE DESCRIPTIONS:** (list all vehicles involved with vending)

\_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Year / \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Year

\_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Year / \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Year

**HEIGHT:** \_\_\_\_\_ **WEIGHT:** \_\_\_\_\_ **EYE/HAIR COLOR:** \_\_\_\_\_ **SCARS/TATTOOS:** \_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic offense in any city/state/country?

EXPLAIN:

(If the permit is obtained by false representation in the application or by deceptive trade the permit will be revoked.)

I, \_\_\_\_\_ ACKNOWLEDGE THAT I AM FAMILIAR WITH THE  
TERMS OF THE CITY OF DAYTON ORDINANCE AND ITS PROVISIONS FOR SOLICITATION AND I  
SWEAR THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT. I  
ALSO UNDERSTAND, IF I DO NOT PROVIDE ALL INFO AS STATED HEREIN, I CANNOT DO ANY  
VENDING WITHIN THE CITY LIMITS OF DAYTON.

Signature Of Solicitor/Peddler \_\_\_\_\_ Date: \_\_\_\_\_

Approved/Not approved: \_\_\_\_\_ BY: \_\_\_\_\_ PERMIT# \_\_\_\_\_

**ATTACHED:** Bond Copy: \_\_\_\_\_ Permit Copy: \_\_\_\_\_ TXDL Copy: \_\_\_\_\_

**PLEASE ATTACH COPIES OF TEXAS DEPARTMENT OF HEALTH CERTIFICATES/PERMITS AND  
ALL OTHER STATE AND FEDERAL CERTIFICATES/PERMITS ASSOCIATED WITH YOUR VENDING  
GOODS OR SERVICES.**

**TO SUBMIT FORM PLEASE EMAIL IT TO [PLANNING@DAYTONTX.ORG](mailto:PLANNING@DAYTONTX.ORG)**