APPLICATION FOR

VENDOR PERMIT

Incomplete applications will not be accepted.
Indicate "NA" when an item does not pertain to your application.

Department of Community Development

VENDOR LOCATION
Assigned address:

Property Owner Information:		
Name:	Address:	Phone:

CLASS PERMIT TYPE

Peddler	Hawker	Solicitor	Transient Dealer	Mobile Food Unit	Itinerant Vendor	Canvasser

Merchandise Description:

Primary Applicant/Organization Information

Name:	Phone:
Address:	ID or DL #:
Email:	Tax Exempt: _____ Y _____ N TYPE :

Please list all offenses, misdemeanors and felony convictions for the past (7) seven years on the back in the space provided.

1st OPERATOR INFORMATION	2nd OPERATOR INFORMATION
NAME:	NAME:
ADDRESS:	ADDRESS:
CITY: _STATE: ZIP:	CITY: _STATE: ZIP:
E-MAIL:	E-MAIL:
PHONE 1: _____ - _____ - _____	PHONE 1: _____ - _____ - _____
DOB: _____ - _____ - _____ Place of Birth:	DOB: _____ - _____ - _____ Place of Birth:

Please list all offenses, misdemeanors and felony convictions for the past (7) seven years on the back in the space provided.

Vehicle: Year_____ Make_____ Model_____ License Plate_____
Vehicle: Year_____ Make_____ Model_____ License Plate_____
Vehicle: Year_____ Make_____ Model_____ License Plate_____

CERTIFICATION: THE UNDERSIGNED HEREBY CERTIFIES THAT ON THIS DATE APPLICATION WAS MADE FOR A PERMIT WITH THE CITY OF WILLIS AND THAT THE INFORMATION PROVIDED ON THIS APPLICATION AND SUPPORTING DOCUMENTATION SUBMITTED IS TRUE AND CORRECT. BY THIS SIGNATURE; THE APPLICANT HAS READ ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND AGREES TO COMPLY WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL CODES AND CITY ORDINANCES.

_____   _____   _____
Signature of Applicant   Application Date   Phone # (if not listed above)

_____   _____
Printed Name   Contact E-Mail (if not listed above)

Primary Applicant;

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

1st Operator;

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

2nd Operator;

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____