

VILLAGE OF PORT AUSTIN

“PEDDLER PERMIT AND LICENSE”

Applicant's Name: _____

Applicant's Address: _____

Applicant's Phone: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone: _____

Nature of Business: _____

Good to be sold: _____

Time Span of Business: _____

If using a vehicle, please give a description and license plate number:

I do here by state that I have _____, have not _____ been convicted of any crime, misdemeanor, or violation of any municipal ordinance. If you have been convicted, please state the nature of the offense and the punishment or penalty assessed: _____

Date of Application

Signature of Applicant

.....

This application is APPROVED _____ DISAPPROVED _____

DATE _____

Signature of Police Chief

PERMIT FEE **\$25.00** PER DAY

Check NO. _____ CASH _____

*PEDDLERS ARE REQUIRED TO EXHIBIT THIS NON-TRANSFERABLE PERMIT AND LICENSE AT THE REQUEST OF ANY CITIZEN.