



PEDDLER/VENDOR PERMIT APPLICATION

Permit # _____

Peddler/Solicitor activity hours are between 9:00 am and Sundown

Per Sec. 4.02.013 of ordinance Article 4.02

PEDDLER / VENDOR INFORMATION

Applicant Name: _____ Address: _____

Business Name: _____

Proposed Sale Dates: _____ to _____

DL #: _____ State: _____ Sales Tax Permit # _____

Products to be sold: _____

Phone: _____ Email: _____

PEDDLERS ONLY: This section to be completed for door-to-door peddlers only

List Agents info below: Name, Address, Phone #, Date of Birth, Physical Description and a Valid, government issued photo ID for each agent/worker – attach a second page if needed.

Vehicle and/or Trailer description if applicable, (Year, Make, Model, License Plate # and state): _____

ITINERANT VENDORS ONLY: This section to be completed for fixed set up at 1 location

Proposed Set-up Location

Business Name: _____

Address: _____

Please attach a site plan indicating the following information:

- ☐ Location of building/business
- ☐ Location and number of available parking areas and drive aisles
- ☐ Location of transient vendor staging area
- ☐ Number of parking spaces used for staging area

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Property Owner's Information

Name: _____ **Title:** _____

Property address: _____

Mailing address: _____

Phone #: _____ **Email:** _____

* Itinerant vendors must submit a written statement from the property owner allowing vendor set up on property. Statement must include the vendor business name, products to be sold, and dates of sale allowed, with signature of property owner.

Has Applicant/Sponsor/Agent been convicted of any crime or municipal ordinance violation? ☐ Yes ☐ No

If yes, include a description of the offense and the penalty assessed:

All peddlers and solicitors not exempted of ordinance will pay a permit fee of \$50.00 per day. If there are agents engaging in peddling activities on behalf of applicant, a fee of \$5.00 per agent will be charged. Replacement permit is \$5.00. Upon request or demand, applicant/agent will exhibit this permit to indicate compliance with all requirements.

Valid government issued ID card with photograph must be submitted with Application for ALL parties involved.

By signing this application, the applicant attests that the above information is true to the best of his/her knowledge, and the applicant agrees to comply with The City of Winnsboro Code of Ordinances terms.

Applicant Signature: _____ **Date:** _____

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**Office Use Only:**

**Date of SUBMISSION:** \_\_\_\_\_ ☐ Approved ☐ Denied

**Rec'd by:** \_\_\_\_\_ **Receipt Number:** \_\_\_\_\_