

CITY OF ANNA PEDDLER'S PERMIT

NAME: _____ **DATE:** _____

ADDRESS: _____ **PHONE:** _____

DOB: _____ **SOCIAL SECURITY #** _____

DRIVERS LICENSE # _____ **MAKE** _____

MODEL _____ **VEHICLE LICENSE #** _____

ATTACH A COPY OF DRIVERS LICENSE OR STATE ID

TYPE OF PERMIT

DAILY - \$10.00 PER DAY, PER PERSON _____

ANNUAL - \$150.00 PER YEAR _____

NON-FOR-PROFIT ORGANIZATION _____

VEHICLES, ETC. \$100.00 DAILY _____

AREA ITEMS WILL BE SOLD IN: BUSINESS ___ **RESIDENTIAL** ___ **BOTH** ___

LIST ITEMS TO BE SOLD: _____

SALES TAX ID# _____

COMPANY OR ORGANIZATION NAME: _____

ADDRESS: _____

MANAGER'S NAME: _____ **PHONE #** _____

PEDDLING OR HAWKIN HOURS SHALL BE FROM 8 AM OF EACH DAY UNTIL 8 PM OF THE SAME DAY. NO FOOT PEDDLING ON SUNDAY. ALLOW A MINIMUM OF 24 HR. FOR BACKGROUND CHECK TO BE COMPLETED DURING NORMAL BUSINESS HOURS.

BACKGROUND CHECK COMPLETE AND ATTACHED BY _____
(MUST BE COMPLETED BEFORE PERMIT GRANTED)

SIGNATURE OF APPLICANT

DATE

CITY SEAL

RECEIVED BY

AMOUNT PAID