

Application Date: \_\_\_\_\_



P.O. Box 369 (Mail)  
303 E. Pecan Dr. (Physical)  
Johnson City, TX 78636  
830.868.7111 (Phone)  
830.868.7718 (Fax)

## PEDDLER PERMIT APPLICATION CHAPTER 4

Name of Applicant: \_\_\_\_\_

Applicant's Home Address: \_\_\_\_\_

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

Business Address: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

Location Where Goods Will Be Sold: \_\_\_\_\_

Hours Of Operation: \_\_\_\_\_

Type of Merchandise or Services: \_\_\_\_\_

Vehicle Make, Model & Color: \_\_\_\_\_

Vehicle License Plate Number: \_\_\_\_\_

Driver License #/State Issued: \_\_\_\_\_

Start and End Dates of Solicitation: \_\_\_\_\_

Have you ever been convicted of a felony? No \_\_\_\_ Yes \_\_\_\_

If yes, please provide the date, type of convictions, and location of convictions:

\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

***Please attach a copy of your driver's license and two passport-type photographs. Refer to the City's fee schedule for permit fees. You will be notified when the permit is approved or disapproved.***

APPROVED

DISAPPROVED

\_\_\_\_\_  
Police Chief's Signature

\_\_\_\_\_  
Date

Office Use Only: