SOLICITORS PERMIT REGISTRATION

Notice to Applicant your application fee of $10.00 is non-refundable.
Permit Fee (3) Months $112.00, (6) Months $170.00 (12) Months $226.00

Insurance or Bond Required Before any license shall be issued , the application shall be accompanied by a bond or insurance policy in an amount not less than fifty thousand and no/100 dollars ($50,000.00) acceptable to the City Secretary to cover any and all property damage, injuries, including injury resulting in death, or wrongful fraudulent or illegal conduct of the vendor while conducting business in the city. The bond or insurance policy shall remain in full force and effect during the entire duration of the license as provided in this article and one (1) year thereafter.

Special Events Restriction No vendor having acquired a license from the City of Terrell shall be allowed to engage in the business of selling, displaying, or offering for sale any food, beverage, goods, services or merchandise at any Special Event without first seeking approval for the same from the Sponsoring Organization.

Hours of Operation. - Vendors shall be allowed to engage in the business of vending only between the hours of 8:00 A.M. to 10:00 P.M

Applicant Information

Information must be provided for each employee/representative.

Applicant Name:_____ Date of Birth:_____
(First) (Middle) (Last)
Applicant Address:_____
(Street/P.O. Box (City) (State) (Zip)
Age: _____ Driver License No.: _____ License State:_____
Height:_____ Weight:_____ Sex: _____ Hair Color: _____ Eye Color: _____
Phone #: (home)_____ (work)_____ (mobile)_____
Social Security Number:_____

Employees/representatives are required to have photo identification.

Business Location Information

A written statement from the property owner consenting to applicant's use of his/her property for the sales activities indicated in the permit application shall be provided with this application.

Address _____

Date of Intended Use Beginning _____and Ending _____

Restrictions Applicable to all Vendors

Handicapped Areas - No vendor shall conduct business within 20 feet of any handicapped parking space or access ramp.

Prohibited Areas. Vendor stands and motor vehicles are prohibited within 20 feet of a fire hydrant, fire escape, loading zone, or the driveway of a fire station, police station or hospital.

Noise - No vendor may sound any device which produces an unreasonably loud and raucous noise to attract public attention.

Motor Vehicles - No vendor vending from a motor vehicle shall:

a. Stop, stand or park the vehicle within 20 feet of any intersection, within any other prohibited area, or during prohibited hours;
b. Conduct business in such a way as would increase traffic congestion or delay, constitute a hazard to life or property, interfere with an abutting property owner, or obstruct access to emergency vehicles.

Applicant Vehicle Information

Make of Vehicle: _____ Auto License Plate #:_____
Model of Vehicle:_____ Vehicle Year:_____
Insurance Company Name _____Policy No. _____
Expiration Date _____

Company Information

Company Representing:_____
Company Address:_____
(Street/P.O. Box (City) (State) (Zip)
Company Phone Number:_____
Company Contact Name _____
Description of goods, wares, merchandise, etc to be sold: _____
_____
List of any other license issued by City of Terrell_____

Have you, your spouse and/or an employee been convicted of a felony or a misdemeanor involving theft, fraud, bribery, rape, assault or perjury? ☐ Yes ☐ No

If yes, Please Explain:

_____

_____

_____

_____

Please attach application fee. $10.00

A copy of the vendor's current State of Texas Sales Tax Permit together with written documentation from the State Comptroller that all sales taxes that may be due and owing by the vendor have been fully paid;

<u>Monthly Reports</u> - All vendors shall provide a copy of their monthly report of sales tax receipts to the City Secretary. REPORTS ARE DUE IN THE CITY SECRETARY'S OFFICE BY THE 20TH OF THE FOLLOWING MONTH.

IF YOU FAIL TO REPORT YOUR SALES TAX THE CITY WILL REVOKE YOUR PERMIT.

All information provided above is true and correct to the best of my knowledge. I understand that any falsification of information I may have given is a misdemeanor and may result in the denial or revocation of the permit or registration certificate applied for.

_____ _____

Applicant Signature Date

THE FOLLOWING TO BE COMPLETED BY CITY PERSONNEL.

Do not write below this line.

1. Has applicant furnished (2) forms of identification? (Driver License) and Other _____ ☐ Yes ☐ No
2. Has applicant furnished proof of company representing? ☐ Yes ☐ No
3. Has the applicant furnished a surety bond, if applicable? ☐ Yes ☐ No
   Surety bond or Insurance amount $50,000.00
4. Has the applicant furnished proof of State Sales Tax Permit? ☐ Yes ☐ No

APPLICATION FOR SOLICITORS PERMIT: **Approved [ ]** **Denied [ ]**

_____ By: _____

Date John Rounsavall, City Secretary

Expiration Date of Permit:_____ Clerk Initial:_____

Comment

_____

WARNING THIS APPLICATION / PERMIT IS NOT VALID IF NOT SIGNED OR IF THE CITY SEAL IS NOT AFFIXED TO THIS DOCUMENT.