

City of Roanoke Rapids Permit Application Itinerant Merchant - Peddler



TERM OF LICENSE: July 1 through June 30

Application Date: _____ Acct #: _____ Permit #: _____
----- For Office Use Only -----

Business Name: _____
Dba: _____

Business Type: Sole Proprietorship _____ Corporation _____ Partnership _____ Other _____

Physical Address: _____

Phone #: _____ Fax #: _____

Contact: _____ Email: _____

Mailing Address (if different): _____

Application for: Itinerant Merchant _____ Peddler by Vehicle _____ Peddler on Foot _____

Description of Goods for Sale: _____

Days and Hours of Operation: _____

Name of person(s) and any employees having the management or supervision of the business while it is operating within the City – Include local address and permanent address (if different) for each person: _____

If the applicant, or any of the people listed above, has been convicted of any crime or misdemeanor provide the date and describe the nature of each offense: _____

Locations within the city where applicant proposes to conduct business – Include length of time at location and provisions made for access and parking (list each location separately):

Vehicles to be used to conduct business – Include state and registration number (list each vehicle separately):

Provide written proof of the property owner's permission for each location: _____

** A Business Registration Application is also required.

Signature of Applicant

Date