

Town of Kimball 675 Main Street

Kimball, Tennessee 37347 PHONE: (423) 837-7040 FAX: (423) 837-1039

E-MAIL: scase@townofkimball.com WEBSITE: www.townofkimball.com

APPLICATION: PEDDLER'S/TRANSIENT VENDOR'S LICENSE

DATE OF APPLICATION	TYPE OF	LICENSE				
		Peddler		Transient	Vendor	
ORGANIZATION/COMPANY I NAME OF ORGANIZATION/C		IS THIS A NON-PROFIT GROUP?				
			OT THE		710	
STREET ADDRESS	APT. #		CITY	STATE	ZIP	
APPLICANT INFORMATION FIRST NAME	LAST NAME	MI.		SOCIAL SEC. #		DATE OF BIRTH
STREET ADDRESS	APT. #		CITY	STATE	ZIP	
TELEPHONE NUMBER						
HOME:	WORK:		MOBILE:			
NATURE OF EMPLOYMENT			LENGTH	OF EMPLO	DYMENT	
NATURE OF BUSINESS FOR WHICH LICENSE IS DESIRED (Please specify items that will be offered for sale)						
DATE(S) EXPECTED TO CON	DUCT THIS ACTIVIT	Y		LOCATIO	N OF SA	LE
THIS APPLICATION MUST BE RECEIVED BEFORE ANY COMMENCEMENT DATE OF BUSINESS OR PENALTY AND INTEREST APPLY.						
Minimum Fee \$45.00						
Penalty (5% for each 30 days or fraction thereof not to exceed 25%)Interest (per annum from delinquent date until paid) (x no. days delinquent)\$5.00Registration Fee						
Total Payment due, MAKE CHECK IN THIS AMOUNT						\$50.00

I hereby affirm that this application contains no willful misrepresentation or falsifications and that the information given is true, accurate and complete to the best of my knowledge and belief. I understand that all applicants, including myself, may be subject to a background check and hereby authorize the Town of Kimball, and/or its agent to do so. I understand that the Town of Kimball reserves the right to refuse the issuance of the peddler's/transient vendor's permit.

Applicant's Signature:

Title:

RETURN TO TOWN OF KIMBALL, 675 MAIN STREET, KIMBALL, TN 37347