

CITY OF McLEANSBORO

APPLICATION FOR TRANSIENT MERCHANT – ITINERANT VENDOR LICENSE

Please print legibly or type

A Transient Merchant-Itinerant Vendor License may only be obtained by filing this application with the City Clerk's office no less than 10 business days in advance of the proposed activity.

DEFINITIONS:

Transient Merchant: A person/business temporarily in the retail sale of goods, wares, or merchandise in this City and who, for the purpose of conducting such business occupies any building, room, vehicle, structure of any kind, vacant lot or parcel of property.

Itinerant Vendor: A person/business who transports tangible personal property for retail sale within the City who does not maintain in this City an established office, distribution house, sales house, warehouse, service center, or residence from which such business is conducted.

Name of Business _____

Street Address of Business _____

PO Box of Business _____

City State Zip _____

Business Phone (_____) _____ Business Fax (_____) _____

Location from which Applicant intends to sell _____

Date (s) from which Applicant intends to sell _____

Nature of Business proposed to be conducted. Include the type(s) of goods to be sold and how those goods will be sold (out of a truck, from a stand, etc.) Be Specific. _____

Describe the Vehicle to be Used (If Applicable)

Make and Model _____ Color _____

License # _____ State _____

List all licenses to conduct business as a transient merchant and/or itinerant vendor obtained within the State of Illinois within the last 12 months:

Have you ever made a previous application for a transient merchant and/or itinerant vendor license in the City of McLeansboro? _____ Yes _____ No

If yes, was that license approved? _____ Yes _____ No

If no, what was the reason? _____

BUSINESS OWNERSHIP INFORMATION

NAME OF OWNER/PRESIDENT _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

PHONE NUMBER (____) _____ DATE OF BIRTH _____

DRIVER'S LICENSE # _____ STATE OF ISSUANCE _____

Please attach the following:

- o Cash or certified check in the amount of \$100.00 for annual license good from May 1-April 30

OR

- o Cash or certified check in the amount of \$25 for a 7 day license good from _____ until _____
- o Liability Insurance – the applicant shall file with the City Clerk's office the application, along with an insurance declaration page issued by an insurance company having authority to do business in Illinois. The applicant shall cause the City to be named as an additional insured on said policy and shall promptly notify the City if said insurance is cancelled or suspended
- o Notarized statement from the property owner authorizing you to sell from his/her property through April 30th of the current City fiscal year.
- o Illinois Retailer's Occupation Tax (Sales Tax) Certificate.
- o Complete inventory of goods to be sold.
- o Hamilton County Health Permit (if applicable).
- o State or Federal Tax Identification Number (FEIN): _____
- o A completed Background Authorization Form (attached) for the applicant whose signature appears below and every person who will be in contact with the public for the purpose of stocking, transporting, delivering, and/or selling the goods, wares or merchandise. Additional forms may be obtained from the City Clerk's Office.

Date _____

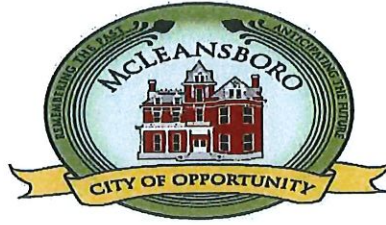
Signature of Applicant

Attest:

Date _____

Signature

This application and supporting documents may be sent to the City Clerk's Office, City Hall, 102 West Main Street, McLeansboro IL 62859.



City of McLeansboro

102 W. Main Street
McLeansboro, IL 62859
618-643-2723

BACKGROUND AUTHORIZATION FORM

I, _____, authorize the
First Name Middle Initial Last Name
McLeansboro Police Department to run a criminal background check.

Signature

Date*

Date of Birth

Driver's License #

State

*This authorization is good for 30 days from the date it is signed.