

**CITY OF FULTON, MISSOURI
APPLICATION FOR PERMIT - TRANSIENT VENDOR**

Date issued: _____ / _____ / 20_____ . _____

Date expires: _____ / _____ / 20_____ . _____

TO THE CITY CLERK
CITY OF FULTON, MISSOURI

I,

,

Applicants name

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Address, City, State, Zip Phone #

Social Security No. _____ , do hereby make application for
a

PERMIT (circle one) person to person, telephone or mailing as a (circle one) Solicitor, Peddler,

Canvasser, Salesman, Hawker, Itinerant Merchant, or Vendor, to conduct the business of house-

to-house soliciting in the City of Fulton, Missouri for: _____
Company Name

State Sales Tax No. _____ State License No. _____

PRODUCT OR MERCHANDISE INVOLVED: _____

Description of product, service and/or operation (if covered by printed matter, please attach)

I certify that the foregoing answers are true to the best of my information and belief and are made
for the purpose of procuring the PERMIT applied for. I agree to abide by all city ordinances.

Applicants Signature: _____

Attest: _____

ALL SALES TAX COLLECTED WITHIN THE CITY LIMITS OF FULTON SHOULD BE
REPORTED TO THE STATE OF MISSOURI USING OUR CITY CODE NUMBER 14-3
(FULTON).

Driver's License No. _____ Vehicle License No. _____

Make: _____ Year: _____ Model: _____