

APPLICATION FOR TRANSIENT VENDOR'S PERMIT

City of Clayton
6996 Taywood Road
Englewood, OH 45322

Name of Applicant _____
Name of Business _____
Business Address _____
Temporary Address _____

Phone (Home) _____ Phone (Business) _____
Temporary Phone _____ Social Security No. _____
Date of Birth _____ Height _____ Weight _____ Hair Color _____ Sex _____
Color of Eyes _____ Drivers License No _____ State _____
Motor Vehicle Info: Make of Car _____ Model _____ Year _____
License No. _____ State _____ Proof of Insurance Shown? Yes _____ No _____
(If more than one vehicle will be used, use back of this form for added information)

Name of Employer _____
Name of Person in Charge _____
Address if Different From Above _____

Vendor's License Number _____
Describe Ware, Merchandise, or _____
Services Being Offered _____

Do you have any criminal record other than minor traffic violations? Yes _____ No _____
If yes, describe in detail. _____

This Permit Application is for a Period Beginning _____ And Ending _____
And such Activity will be Performed Between the Hours of _____ A.M. and _____ P.M., with
no Sunday or Holiday Activities Conducted.

Have you ever been denied a permit or license to conduct any business like the one being applied? _____.
If Yes, describe on the reverse side.

Have you ever had a permit or license to conduct any business like the one being applied for revoked by
any jurisdiction? If Yes, give details on back.

*I swear that all of the answers above are true, and that I have read all of the resolutions/regulations governing Transient
Vendor's and the permit which I have applied for.*

Signed (applicant)

Date