



415 N. College Ave
Justin, Texas 76247
(940) 648-2541

City of Justin Vendor/Itinerant Permit Application

Permit #: _____

Expiration Date: _____

<input type="checkbox"/> Vendor	<input type="checkbox"/> Itinerant Business
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Name of Business Business Phone #

Business Address Business Email

Name of Applicant/Business Owner Applicant/Business Owner Address, City, State, Zip

Driver's License # DOB DBA Tax ID #

Please list Name, Address, Phone #, DL#, & DOB of others that will be operating under this permit:

Vehicles that will be used with this permit:

Make	Model	Year	Plate #

Type of item(s)/service(s) being sold or solicited: _____

By signing below, the applicant agrees to provide a copy of their Drivers License, undergo a background check if applying for a Vendor Permit, and once approved pay the appropriate fee.

Signature of Applicant

Print

Date

<u>Permit Official</u>
Fee: \$ _____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied
_____ Signature of Police Officer
_____ Signature of Permit Official

FOR OFFICE USE ONLY		
_____ Received By	_____ Date Received	_____ Date Issued
_____ Date Paid	<input type="checkbox"/> Cash <input type="checkbox"/> CC	<input type="checkbox"/> Check #(s): _____