

ITINERANT VENDOR PERMIT APPLICATION

ALL of the following information must be completed by applicants: (PLEASE PRINT)

Full Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Driver's License No. \_\_\_\_\_ State \_\_\_\_\_

Color of Eyes \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_

Applicant's permanent home address: \_\_\_\_\_ Phone # \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Applicant's local address: \_\_\_\_\_ Phone # \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Name and home office address of applicant's employer: \_\_\_\_\_

Description and license number of any motor vehicles used by applicant in connection with his business: \_\_\_\_\_

Description of the merchandise to be sold: \_\_\_\_\_

List of felony convictions and the disposition of same: \_\_\_\_\_

**The applicant shall sign the statement below and furnish the information listed:**

I swear that the foregoing information is true and correct and constitutes the full and complete information requested.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

**YOU MUST HAVE:**

1. *The written permission of the property owner/manager where the sales activity is conducted.*
2. *Certified letter on Corporate letterhead extending permission for applicant to operate if applicant is not a sole proprietor.*
3. *A site plan which shows the location of the proposed sales operation (may be drawn on the back of this application).* (ALSO SEE BOTTOM OF PAGE)

**NOTE: Permit will be valid for a period of 10 days. A fee of \$50.00 will be charged for a site investigation if necessary.**

**PLEASE NOTE THAT A PERMIT CANNOT BE ISSUED UNLESS THE BOTTOM PORTION OF THIS APPLICATION HAS BEEN SIGNED AND APPROVED BY ALL APPROPRIATE OFFICIALS.**

**A CURRENT LETTER OF PERMISSION FROM THE PROPERTY OWNER IS REQUIRED WITH EACH RENEWAL ANY LOCATION CHANGE REQUIRES A NEW APPLICATION AND LETTER OF PERMISSION FROM PROPERTY OWNER. OTHERWISE, APPLICATION WILL ONLY NEED TO BE RENEWED ANNUALLY.**

**Approved**      **Denied**

\_\_\_\_\_      \_\_\_\_\_      Planning and Inspection Department  
3rd Floor, City Hall, 411 W. 8th St. (432) 335-3211  
Investigation fee required:  Yes       No

\_\_\_\_\_      \_\_\_\_\_  
Official      Date

SEAL

\_\_\_\_\_      \_\_\_\_\_      Texas State Comptrollers Office  
4682 East University, Suite 100      (432) 550-3027  
 Permit Issued      Permit No. \_\_\_\_\_  
 Permit Not Required

\_\_\_\_\_      \_\_\_\_\_  
Official      Date

\_\_\_\_\_      \_\_\_\_\_      Chief of Police, Odessa Police Department  
Police Station, 201 N. Grant (432) 333-3641

\_\_\_\_\_      \_\_\_\_\_  
Official      Date