

**SOLICITOR/PEDDLER/TRANSIENT VENDOR PERMIT APPLICATION****GENERAL INFORMATION**

Pursuant to Gallatin Municipal Code Chapter 11, Article V, a permit issued by the City Recorder is required prior to operating as a solicitor, solicitor for subscriptions, peddler, or transient vendor within the City of Gallatin.

PERMIT TYPE

☐ Solicitor ☐ Solicitor for Subscriptions ☐ Peddler ☐ Transient Vendor

Permit Fee: \$50.00 per applicant (non-refundable). No fee for Solicitors for Subscriptions.

BUSINESS INFORMATION

Business/Organization Name: _____

Business Address: _____

Business Phone: _____ State Sales Tax No.: _____

Goods/Services Offered: _____

Dates of Operation/Solicitation: _____

Method of Delivery (if applicable): _____

APPLICANT INFORMATION (EACH INDIVIDUAL)

Applicant Name: _____

Permanent Address: _____

Phone: _____ Email: _____

Date of Birth: _____ Driver License No./State: _____

Height: _____ Weight: _____ Hair: _____ Eyes: _____

VEHICLES USED

List all vehicles to be used while conducting business or solicitations within the City of Gallatin.

Make	Model	Color	License Plate	State
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- _____
- _____

(Attach additional sheets if necessary)

**PRIOR LOCATIONS OF BUSINESS**

List the last three (3) cities, towns, or municipalities where similar business was conducted:

1. _____
2. _____
3. _____

CONTACT INFORMATION AFTER LEAVING GALLATIN

Address and phone number where applicant may be contacted for at least seven (7) days after leaving the city: _____

CRIMINAL HISTORY

Has the applicant been convicted of any crime or ordinance violation related to transient merchant business within the last five (5) years? ☐ Yes ☐ No

If yes, explain the nature of the offense and place of conviction: _____

Is the applicant a registered sex offender? ☐ Yes ☐ No

APPLICANT CERTIFICATION

I certify the information provided in this application is true and correct to the best of my knowledge and agree to comply with Gallatin Municipal Code Chapter 11, Article V, including all solicitation restrictions and the City's Do-Not-Solicit Registry.

I understand that violations or false statements may result in suspension, revocation, or citation.

Printed Name: _____ Date: _____

Signature: _____

NOTARY ACKNOWLEDGMENT

STATE OF TENNESSEE

COUNTY OF _____

Subscribed and sworn before me this _____ day of _____, 20 _____.

Notary Public: _____

My Commission Expires: _____

(SEAL)



FOR OFFICE USE ONLY

Date Application Received: _____

Application Complete: ☐ Yes ☐ No

Fee Paid: ☐ Yes ☐ No Receipt No: _____

Codes Approval (Transient Vendor Only): ☐ Yes ☐ No

Status: ☐ Approved ☐ Denied ☐ Withdrawn

Date Issued: _____

Expiration Date: _____

Solicitor List Sent to GPD: ☐ Yes ☐ No