



CITY OF GRAND TERRACE
APPLICATION FOR
PEDDLING, SOLICITING OR HAWKING LICENSE

(PURSUANT TO REQUIREMENTS OF CHAPTER 5.64, GRAND TERRACE MUNICIPAL CODE)

TO: CITY CLERK'S DEPARTMENT
CITY OF GRAND TERRACE
22795 BARTON ROAD
GRAND TERRACE, CA 92313

APPLICATION IS HEREBY MADE FOR A CITY OF GRAND TERRACE LICENSE TO ENGAGE IN THE BUSINESS OF PEDDLING OR HAWKING GOODS, WARES, MERCHANDISE OR SOLICITING ORDERS FOR GOODS OR SERVICES, OR OF OFFERING SERVICES FOR REPAIR OR IMPROVEMENT OF REAL PROPERTY EXCEEDING \$25.00 IN COST OR VALUE WITH THE CITY OF GRAND TERRACE, PURSUANT TO THE PROVISIONS OF CHAPTER 5.64, GRAND TERRACE MUNICIPAL CODE, WITH THE KNOWLEDGE THAT, IF APPROVED THE REQUIRED LICENSE FEE SHALL BE PAID TO THE CITY OF GRAND TERRACE FINANCE DEPARTMENT.

1. Applicant's Legal Name: _____

Address: _____
(Number & Street) (City & Zip) (Telephone)

IF RELIGIOUS OR NONPROFIT. ANSWER THE FOLLOWING:

Business Address: _____

Date Articles of Incorporation Filed with the City Clerk's Office: _____

2. Applicant, partners or other persons who will engage in soliciting or hawking (Note: each person must obtain a separate license):

Name	Social Security Number	Driver's License Number
_____	_____	_____
Name	Social Security Number	Driver's License Number
_____	_____	_____
Name	Social Security Number	Driver's License Number
_____	_____	_____

3. Specific locations and time of day applicant intends to hawk, peddle or solicit at each location (written permission of property owner must be submitted with application for all hawkers licenses)

4. The supplier of the goods to be sold and a description of every type of merchandise or service that applicant proposes to hawk, peddle or solicit.

5. Type of operation (peddling, soliciting, hawking): _____

6. Has applicant or persons named in section 2 of this application ever been convicted of theft, fraud, burglary, battery, or been a sex offender in California? () Yes () No (Failure to provide correct information will result in denial or revocation of license.)

Explanation (Give reason and disposition) : _____

7. Description: Hair _____ Eyes _____ Race _____ Weight _____

8. Birth Date _____ Place of Birth _____

If naturalized, place & Date _____

() Married () Single Maiden Name _____ Spouses Name _____

9. Have you ever used any other name () Yes () No If so, give name or names and reasons for use:

10. Do you have a permit to carry a concealed weapon? () Yes () No If so, give name or names and reasons for use:

11. Occupation and employment during the past five years:

Firm	Address	Occupation
Firm	Address	Occupation
Firm	Address	Occupation
Firm	Address	Occupation
Firm	Address	Occupation

A copy of the State Sales Tax Permit (California Revenue and Taxation Code 6066) Must be attached to the application.

I, THE UNDERSIGNED, HEREBY DECLARE THAT I HAVE CAREFULLY READ SECTION 5.64 OF THE GRAND TERRACE MUNICIPAL CODE; THAT I UNDERSTAND IT THOROUGHLY AND WILL CARRY OUT EVERY PROVISION THEREOF. I FURTHER STATE THAT THE STATEMENTS AND ANSWERS CONTAINED IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, KNOWING THAT ANY FALSE STATEMENTS WILL BE SUFFICIENT CAUSE FOR DENIAL OR REVOCATION OF SAID LICENSE. I DECLARE THAT THERE IS NO KNOWN CLOUD ON THE TITLE TO OWNERSHIP OF THE GOODS TO BE SOLD.

Date: _____ Signature: _____

Fee: \$130.00 Annually plus \$50 Business License fee

I HEREBY APPLY FOR ONE OF THE FOLLOWING EXEMPTIONS AND HAVE SUBMITTED VALID PROOF.

() •Disability () ••Under 18 () •••Veteran () •Religious or Nonprofit () •Over 55 () ••Special Veteran

• See Municipal Code

••Letter from Parents Required

•••Authorization from Veterans Affairs Required; Special Veterans Exemption Requires Proof that Applicant owns good. (Business and Professions Code Section 16102)

Special Veterans Exemption Statement: I hereby certify that I own all the goods, wares or merchandise that I plan to hawk, peddle or vend.

Signature: _____

AFTER APPROVAL, THE LICENSE FEE SHALL BE PAID TO THE FINANCE DEPARTMENT, CITY OF GRAND TERRACE, 22795 BARTON ROAD, GRAND TERRACE, CA 92313

SHERIFFS DEPARTMENT

I RECOMMEND THAT THIS APPLICATION BE: () APPROVED () DENIED

Date: _____ By: _____

ALL REQUIREMENTS OF ENVIRONMENTAL HEALTH SERVICES HAVE BEEN MET, AND THE APPLICATION IS RECOMMENDED FOR APPROVAL. (NOT NECESSARY IF APPLICANT IS NOT HANDLING FOOD.)

ENVIRONMENTAL ENFORCEMENT

Date: _____ By: _____

(Reports and recommendation to be returned to the City Clerk within (10) ten days after referral.)

CITY COUNCIL ACTION

() APPROVED () DENIED

Daysi Alcocer, City Clerk

Date: _____

Applicant has submitted:

() State Sales Tax Permit

() Written permission or owner (If hawker license applied for)

() Written permission of parent if under 18 years of age

APPLICATION FEE PAID \$ _____
CASH, CERTIFIED CHECK OR MONEY
ORDER
ACCEPTED BY: