



# THE CITY OF JACKSONVILLE

## APPLICATION FOR ITINERANT VENDOR'S LICENSE CITY OF JACKSONVILLE, TEXAS

THE STATE OF TEXAS }

COUNTY OF \_\_\_\_\_ }

The undersigned, in accordance with the provisions of Ordinance Number 920, Code of Ordinances of the City of Jacksonville, Texas, hereby makes application for Itinerant Vendor's License.

1. a) Applicant's name: \_\_\_\_\_  
b) Date of Birth: \_\_\_\_\_
2. Business address and telephone number: \_\_\_\_\_  
\_\_\_\_\_
3. Residence address and telephone number: \_\_\_\_\_  
\_\_\_\_\_
4. Social Security Number: \_\_\_\_\_
5. Driver's License Number: \_\_\_\_\_
6. State Sales Tax Identification number: \_\_\_\_\_
7. If a corporation, list name, address of principal offices, federal tax identification number, name and address of all shareholders owning more than 10% of shares: \_\_\_\_\_  
\_\_\_\_\_



# ***THE CITY OF JACKSONVILLE***

8. If a partnership, state partnership names, type of partnership (limited or general), as well as names, addresses and telephone number of all partners: \_\_\_\_\_

\_\_\_\_\_

9. State the nature of all goods, wares, or merchandise to be sold: \_\_\_\_\_

\_\_\_\_\_

10. State the source of goods (e.g., name, address, telephone number of the party from whom such merchandise was purchased or otherwise acquired): \_\_\_\_\_

\_\_\_\_\_

11. a) Proposed location of sale (street address): \_\_\_\_\_

b) Name and address of owner or property at proposed location of sale: \_\_\_\_\_

\_\_\_\_\_

c) Current zoning of property at proposed location of sale (if unknown, go to Plumbing and Zoning Department and find out): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# THE CITY OF JACKSONVILLE

12. State whether applicant will sell goods: \_\_\_\_\_

a) From a vehicle: YES \_\_\_\_\_ NO \_\_\_\_\_

b) From a temporary structure YES \_\_\_\_\_ NO \_\_\_\_\_

if YES, describe temporary structure from which goods will be sold: \_\_\_\_\_

\_\_\_\_\_

c) From a permanent structure that is rented or leased: YES \_\_\_\_\_ NO \_\_\_\_\_

if YES, state the duration of lease, address and current zoning of leased property: \_\_\_\_\_

\_\_\_\_\_

d) From no structure or vehicles: YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, describe manner of sale: \_\_\_\_\_

\_\_\_\_\_

13. State whether applicant plans the outside display of merchandise at the location of sale:

YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, describe the manner in which goods will

be displayed: \_\_\_\_\_

\_\_\_\_\_

14. State whether applicant will utilize any signs in aid of the sale of goods offered. If so, state the location proposed location, dimensions, and construction of all signs and the number of signs to be utilized: \_\_\_\_\_

\_\_\_\_\_



# THE CITY OF JACKSONVILLE

15. State whether applicant has ever been convicted or a violation of the Itinerant Vendor's Ordinance of the City of Jacksonville within the preceding three (3) years: YES \_\_\_\_\_  
NO \_\_\_\_\_ if YES, please indicate the date of such conviction: \_\_\_\_\_  
Please state if any of your salespeople have been convicted with dates. \_\_\_\_\_
16. For each employee, independent contractor, agent or other representative who will sell, offer, solicit, take orders for, or distribute commercial printed matter on behalf of applicant, state the following (If more than one salesperson will be in our area, please use an additional piece of paper and answer the following information must be submitted on each salesperson in full)
- a) Name: \_\_\_\_\_
  - b) Date of Birth: \_\_\_\_\_
  - c) Residence address and telephone number: \_\_\_\_\_  
\_\_\_\_\_
  - d) Social Security number: \_\_\_\_\_
  - e) Business address and telephone number: \_\_\_\_\_  
\_\_\_\_\_
  - f) Driver's license number: \_\_\_\_\_



# ***THE CITY OF JACKSONVILLE***

17. State whether any employee, independent contractor, agent, or other representative described in your answer to the preceding interrogatory has, within the past three (3) years, been convicted of any violation of the Itinerant Vendor's Ordinance of the City of Jacksonville. YES\_\_\_\_\_ NO\_\_\_\_\_. If so, please state the date of Conviction including all salespeople who will be in our area representing your product or Company. \_\_\_\_\_

18. This application must be accompanied by the following information on each employee who will be in our area.

a) A recent photograph of the itinerant vendor and each employee, agent, independent contractor or other representative who will sell merchandise on behalf of or in conjunction with the applicant.

b) An itinerant vendor's license fee of one hundred dollars (\$100.00).

c) An itinerant vendor's license fee of twenty-five dollars (\$25.00).

for each employee, agent, independent contractor, or other representative who will sell merchandise on behalf of or in conjunction with the applicant.

PLEASE NOTE: All Itinerant vendor's licenses must be picked up **in person** at the Office of Building Inspection, 1220 South Bolton St. Jacksonville, TX 75766



# THE CITY OF JACKSONVILLE

I hereby certify under penalty of perjury that all information contained in this application is true and correct under penalty of law and contains no material misrepresentation or omission that would render the information given false or misleading. I further acknowledge by my signature below that this application is in accordance with the rules and regulation as stated in Ordinance Number 920, Code of Ordinance of the City of Jacksonville.

SIGNED this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_

**APPLICANT**

THE STATE OF TEXAS }

COUNTY OF \_\_\_\_\_ }

BEFORE ME, , the undersigned authority, a Notary Public in and for said county and State, on this day personally appeared \_\_\_\_\_

Known to me to be the person whose name is subscribed to the foregoing application, and upon oath, deposed and stated that all facts contained in the foregoing Application for Itinerant Vendor’s License are true and correct.

SWORN TO AND SUBSCRIBED BEFORE ME, this the \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public In and For \_\_\_\_\_ County, \_\_\_\_\_