

APPLICATION TRANSIENT MERCHANTS

NAME OF APPLICANT: _____ PHONE NO. _____

NAME OF BUSINESS: _____

BUSINESS ADDRESS: _____

PHONE NUMBER: _____ FAX NUMBER: _____

DESCRIBE NATURE OF THE BUSINESS: _____

LOCATION OF SALE: _____

IF FARM PRODUCTS, IS PRODUCT GROWN BY APPLICANT? _____

PERIOD OF TIME DESIRED FOR LICENSE: From _____ to _____
(not to exceed 6 months)

HAS APPLICANT EVER BEEN CONVICTED OF ANY CRIME, MISDEMEANOR, OR
VIOLATION OF ANY MUNICIPAL ORDINANCE? _____

IF YES, STATE THE NATURE OF THE OFFENSE AND THE PUNISHMENT OR PENALTY
ASSESSED THEREFORE: _____

APPLICANT MUST PROVIDE THE FOLLOWING TO THE VIENNA TOWNSHIP CLERK:

1. A certificate of insurance, naming the township as an insured party, providing comprehensive liability insurance satisfactory to the township.
2. A document which establishes the legal right to use the premises where the license is to be posted, such as a rental agreement, lease or land contract.
3. A drawing prepared to scale as required by ordinance.
4. A statement by the applicant, setting forth the type of business to be conducted, and stating that the business to be conducted is not intended to cheat or defraud the public.

I, _____, do hereby certify that all the above statements are true and accurate to my knowledge and if any statement herein is found to be deliberately false, I acknowledge that said false statement shall be deemed a violation of Ordinance Number 388, Chapter 20, Article III and can be used against me in a court of law. I also acknowledge that I have received and read Ordinance No. 388, Chapter 20, Article III, and understand and promise to follow the stipulations described in such ordinance.

Signature of applicant

Office use only

Signature of receipt: _____

Date of receipt of application to Clerk: _____

Date of receipt of application to Sheriff's Department: _____

Date of receipt of application returned to Clerk: _____