



PEDDLER LICENSE APPLICATION

***Please attach the following items with completed application:

- *2 Passport sized photos (1) for Police Department; (1) for City Hall
- Health District Permit (if applicable) Permit#: (_____)
- *Bond (if applicable) Surety Bond#: (_____)

APPLICANT/VENDOR INFORMATION

**APPLICANT (Full) Name:			
Home Address:		*APPLICANT Phone No.#:	
City:		State:	Zip Code:
Date of Birth:	DL#:	SSN#:	
Height:	Weight:	Sex:	

COMPANY/VENDOR INFORMATION

*Company (Full) Name:		*Company Phone No.#:	
**Company Address:			
City:		State:	Zip Code:
Nature of Articles Sold (describe in detail):			
Will payment for any item be received prior to delivery of said item? <input type="checkbox"/> Yes <input type="checkbox"/> No			
* If yes, a <u>Surety Bond</u> of not less than \$2,000 is to be filed with the <u>City Secretary</u> according to Section 8-31 of code Ordinance #57-82 .			

APPLICANT/AGENT AUTHORIZATION

By signing below, I hereby acknowledge that the above information is **true and complete** to the best of my knowledge. I also acknowledge I have received a copy of **Chapter 8, Article II, Peddlers and Solicitation**.

Applicant's **Signature** _____
Today's **Date**

(DICKINSON POLICE DEPARTMENT USE ONLY)

The Dickinson Police Department has conducted the appropriate investigation into the **above in accordance** with **State Law and Dickinson Code**.

Approved or **Denied** *Signed By: _____ for **Chief Ron Morales**.

(CITY OF DICKINSON/PERMIT DEPARTMENT USE ONLY)

Peddler License Number#: _____ **Application + Permit Fees: \$** 130.00

Date was Submitted: _____ **Payment RCVD:** _____

****INCOMPLETE APPLICATIONS WILL "NOT" BE ACCEPTED****
You May Email this Application to: permits@ci.dickinson.tx.us