

**CITY OF BAXTER
TRANSIENT VENDOR PERMIT**

Date of Permit: _____ Permit# _____ Permit Fee \$20.00

Name: _____

Address:

Phone Number: _____

Requested date of permit: _____

Name of business/organization that you represent: _____

Permanent address of business/organization:

Business/Organization Phone # _____

State Sales Tax ID # if applicable _____

Vehicle _____ Make _____ Model _____

License Tag# and State of Issuance: _____

Description of Type of Business or Goods Sold:

The above person has been given permission for the permit specified above with the City of Baxter under terms of Title 9, Chapter 1, Peddlers, Solicitors, Etc. of the Baxter Municipal Code.

Said permit is valid only upon payment of the \$20.00 fee to the City of Baxter and only for the period allowed under the Baxter Municipal Code. Any false statement, material omission, or untrue or misleading information which is contained in or left out of the application will cause suspension or revocation of permit.

Permit must be displayed. Requestor must also request a permit from Putnam County.

Signature of Solicitor

Signature of City Recorder