



## CITY OF BRILLION

### Application for Transient Merchant Permit

Date: \_\_\_\_\_

Fee: \_\_\_\_\_

Name: \_\_\_\_\_  
last first middle

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_  
Street/Box # City St. Zip

D.O.B.: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Phone #: \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street/Box # City St. Zip

Supervisor: \_\_\_\_\_

Phone #: \_\_\_\_\_

Vehicle: \_\_\_\_\_  
Make Model Year License #

Address where business will be conducted: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Method of delivery of merchandise: \_\_\_\_\_

List last three (3) cities, villages, towns where applicant conducted similar business:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List three (3) personal references (include name, address, phone no.):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Place where applicant can be contacted for at least seven days after leaving city:

\_\_\_\_\_

Have you ever been convicted of any crime or ordinance violation related to transient merchant business within the last five years? Yes \_\_\_\_\_ No \_\_\_\_\_

Nature of the offense

Place of conviction

The facts given in this application are true and correct and I understand that by falsifying the facts given could result in the denial of a permit or revocation of permit.

\_\_\_\_\_  
Signature

Date received and filed with Municipal Clerk:	Date investigation completed by Police Dept:	Date of notification to local merchants of application:	Date of final registration:
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