

**CITY OF FAIRFAX  
LICENSE APPLICATION  
PEDDLERS, SOLICITORS, TRANSIENT MERCHANTS**

Full name: \_\_\_\_\_ Phone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street City State Zip Code

Local Address: \_\_\_\_\_ SS# \_\_\_\_\_  
*(Hotel/Motel Specify)*

***(PICTURE ID REQUIRED)***

List information on all vehicles used while in Fairfax.

Make	Model	Color	Year	State & License #
Make	Model	Color	Year	State & License #

Merchandise to be sold: \_\_\_\_\_  
\_\_\_\_\_

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_

Sales Tax # \_\_\_\_\_

Is company incorporated? \_\_\_\_\_ If yes, what state incorporated in? \_\_\_\_\_

Is corporation authorized to do business in Iowa? \_\_\_\_\_

**LICENSE FEES:**

- A. For one year or major part thereof.....\$10.00
- B. Application filing fee.....\$15.00

LICENSE IS NON TRANSFERABLE, MUST BE DISPLAYED AND IS IN FORCE AND IS EFFECT ONLY BETWEEN THE HOURS OF 8:00 A.M. AND 9:00 P.M.

Transient Merchants Only - Bond required with the Secretary of State in accordance with Chapter 9C of the Code of Iowa.

As Applicant for the above license and under the penalties of perjury, I swear the above statements are true and correct. Also, I am aware of Section 122 of the City code of Fairfax and agree to abide by those rules. I also authorize the City of Fairfax to perform a background search in conjunction with this application.

Date: \_\_\_\_\_  
Applicant's Signature: \_\_\_\_\_

OFFICE USE ONLY		
Fee paid _____	Insurance rec'd _____	Background check _____
Permit Number _____	Permit expiration date _____	