

PEDDLERS OR SOLICITORS PERMIT APPLICATION



PEDDLER OR SOLICITORS INFORMATION

NAME:	PHONE:
MAILING ADDRESS:	EMAIL:
DRIVERS LICENSE NUMBER:	EXPIRATION DATE:
COMPANY NAME, POSITION AND TITLE:	

SOLICITOR OR PEDDLERS MANAGER OR DIRECT SUPERVISOR

NAME:	PHONE:
MAILING ADDRESS:	EMAIL:
DRIVERS LICENSE NUMBER:	EXPIRATION DATE:
COMPANY NAME, POSITION AND TITLE:	

COMPANY WHOSE PRODUCTS ARE BEING SOLD

COMPANY NAME:	PRODUCT OR SERVICE BEING SOLD:
MAILING ADDRESS:	PHONE:
ARE YOU EMPLOYEED DIRECTLY BY THIS COMPANY? <input type="checkbox"/> YES <input type="checkbox"/> NO	WEBSITE:

DISCLOSURE

HAS THE PEDDLER OR SOLICITOR EVER BEEN CONVICTED OF A FELONY? ☐ YES ☐ NO IF YES, COMPLETE THE FOLLOWING SECTION FOR EACH OFFENSE.

LOCATION(S)	DATE(S) OF THE OFFENSE(S)	NATURE OF THE OFFENSE	PUNISHMENT OR PENALTY ASSESSED
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APPLICATION TYPE

- ☐ NEW APPLICATION ☐ APPLICATION WITH CASH SURETY BOND ☐ CASH SURETY BOND REFUND REQUEST (15 DAYS)

LIABILITY INSURANCE OR SURETY BOND

THE PEDDLER OR SOLICITOR MUST PROVIDE ONE OF THE FOLLOWING. PLEASE INDICATE WHICH OPTION THE APPLICANT WILL PROVIDE. ALL POLICIES MUST INCLUDE CITY OF CRESCENT AS A NAMED INSURED, BUT ACTION MAY BE TAKEN AGAINST THE POLICY OR SURETY BOND BY ANY CITIZEN DAMAGED BY THE APPLICANT.

- ☐ LIABILITY INSURANCE POLICY LISTING THE APPLICANT.
- ☐ SURETY BOND IN THE AMOUNT OF \$1,000.00 EXECUTED BY A LICENSED SURETY COMPANY QUALIFIED TO DO BUSINESS IN OKLAHOMA.
- ☐ CASH SURETY BOND IN THE AMOUNT OF \$1,000.00 PAID TO THE CITY OF CRESCENT. CASH BONDS WILL BE RELEASED 15 DAYS AFTER REFUND REQUEST.

ADDITIONAL DOCUMENTATION

PLEASE PROVIDE THE FOLLOWING ADDITIONAL DOCUMENTATION.

- ☐ GOVERNMENT ISSUED ID FOR THE PEDDLER OR SOLICITOR.
- ☐ CURRENT OSBI BACKGROUND CHECK (WITHIN LAST 90 DAYS).
- ☐ COPY OF LIABILITY INSURANCE OR A SURETY BOND IN THE AMOUNT OF \$1,000.00, OR RECEIPT FOR A CASH BOND.
- ☐ IF ANY FOODS, VITAMINS, SUPPLEMENTS OR EDIBLE PRODUCTS ARE BEING SOLD, INCLUDE A COPY OF THE OKLAHOMA STATE HEALTH PERMIT.
- ☐ COPY OF THE OKLAHOMA STATE SALES TAX PERMIT OR CHARITABLE EXEMPTION.

NOTES

APPLICANT SIGNATURE: _____ DATE: _____