

Transient Merchant License Application

Applicant

Business Name: _____

Applicant Name: _____

Present Residence: _____

Present Home Address: _____

Present Business Address: _____

Email: _____

Cell Phone: _____

Person(s) having Management or Supervision of Applicant's Business

Name: _____

Present Address: _____

Present Business Address: _____

Corporation: Y / N

Additional Information

Business Address and Type of Business in which you, the applicant, have been engaged in the previous two (2) years:

Place(s) within the City of Oakes where it is proposed to carry on applicant's business: _____

Length of time said business shall be conducted: _____

Kind of business to be conducted _____

Name(s) and address of who will conduct the sale: _____

Briefly describe the nature, character and quality of the goods, wares or merchandise to be sold or offered for sale by applicant in the City _____

What is the invoice value and quality of such goods, wares and merchandise? _____

Are the same proposed to be sold from stock in possession or by sample; by direct sale or by direct sale and by taking orders for future delivery?

Where are the goods or property proposed to be sold manufactured or produced? _____

Where are such goods or products located at the time said application is filed? _____

Fee is fixed at \$25.00 per day for each and every day any such transient merchant shall transact business in the City of Oakes.

(See Ordinance Chapter 8, Article 2)

