

APPROVED

DENIED



City of Alliance

Planning & Development Dept.

504 E. Main St.

Alliance, OH 44601

Phone: (330) 829-2235 Fax: (330) 821-9362

Email: crockett1@allianceoh.gov

Application for Permit

(A separate request is required per person)

SOLICITORS, PEDDLERS, CANVASSERS, HAWKERS,
AND TRANSIENT VENDORS

"Temporary Business License Application"

A. C. O. 765.01 et seq

Ord. No. 59-18

1. Full Name of Applicant: _____ DOB: _____

2. Address of Applicant: _____

3. Telephone Number of Applicant: _____

4. Physical Description of Applicant: (Photo ID required)

Age: _____ Height: _____ Weight: _____

Hair Color: _____ Eye Color: _____ Sex: _____

5. Social Security Number of Applicant: _____

6. Name of company representing: _____

Address of company: _____

Phone number of company: _____ Fax Number: _____

Immediate Supervisor: _____ Phone: _____

7. Description or nature of proposed business including proposed location for goods, merchandise or property to be sold: _____

8. Has Applicant ever been convicted of a felony or a misdemeanor involving moral turpitude? If so, please give date, location, nature and penalty imposed: _____

SIGNATURE OF APPLICANT

Date