



TOWN OF SUNMAN

# Itinerant Merchant & Solicitor Application

604 N. Meridian St. | Sunman, IN 47041

Applicant & Business Information

## Important filing and solicitation information

This application must be filed at least three (3) days before the applicant is authorized to begin business transactions. Appropriate solicitation hours within the Town of Sunman are 9:00 a.m. to 6:00 p.m.

## 1. APPLICANT AND BUSINESS INFORMATION

Application Date

Phone Number

Email Address

Applicant Full Name

Business Name

Business Street Address

City

State

ZIP

If a corporation, date of incorporation

State of incorporation

If formed outside Indiana, date qualified to transact business in Indiana

Place where business or solicitation will be conducted

Type of goods or services to be sold or offered



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License Request & Applicant Certification

## 2. LICENSE PERIOD REQUESTED

☐ One day - \$7.50 ☐ One week - \$25.00 ☐ One month - \$100.00

☐ Other

## 3. ADDITIONAL PEOPLE TO BE ISSUED A PERMIT

List each additional person's name, address, and phone number.

## 4. APPLICANT ACKNOWLEDGMENT AND CERTIFICATION

All orders taken by solicitors within the Town shall be in writing in duplicate, stating the terms and the amount paid in advance, and one copy of the order shall be given to the purchaser.

All license fees must be paid in advance. If a licensee wishes to continue business after the license expires, a new license must be secured in the same manner and upon the same terms as the original license.

### By signing below, I acknowledge and agree that:

I have read and understand the applicable Town requirements, including the authorized solicitation hours of 9:00 a.m. to 6:00 p.m. I understand that violations of the applicable ordinance may result in penalties and that each day of a violation may constitute a separate offense.

Applicant Signature

Date



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Town Review - Office Use Only

OFFICE USE ONLY - APPLICANT MAY STOP HERE

5. TOWN MARSHAL REVIEW

☐ Approved

☐ Denied

Reason for Denial, if applicable

Town Marshal Notes

Town Marshal Signature

Date

6. CLERK-TREASURER REVIEW

☐ Approved

☐ Denied

Receipt Number

Amount Paid

Reason for Denial, if applicable

Clerk-Treasurer Notes

Clerk-Treasurer Signature

Date