



**CITY OF PLEASANTON
COMMUNITY DEVELOPMENT SERVICES DEPARTMENT**



ITINERANT MERCHANT VENDOR /PEDDLER PERMIT APPLICATION

APPLY FOR: **ITINERANT MERCHANT** **PEDDLER**

APPLICANT NAME:		DL # OR I.D # :	STATE:
BUSINESS NAME:		BUSINESS ADDRESS:	
BUSINESS PHONE #:	CELL#:	EMAIL:	
VEHICLE LIC#:	INSURANCE NAME & POLICY #:	FEDERAL TAX I.D # OR SS #:	

TYPE OF PRODUCT (S) SELLING (LIST ALL ITEMS):

Do you require a cash deposit or do you require a contract agreement to finance the sale of any goods, services or merchandise for future delivery services to be performed? YES NO * If yes, you must provide a surety bond of \$ 1,000 to the City Of Pleasanton.*

Checklist, Requirements and Information :

- A copy of an un-expired State Driver’s License or State Identification Card for all applicants shall be provided.
- “Restroom Facility Agreement” Form shall be signed and filled out for permitting if applicable.
- Provide a copy of the Texas Sales and Use Permit, if merchandise is Taxable.
- A notarized letter giving permission to be on the property from the property owner shall be provided for permitting.
- Tax ID and City permit shall be displayed at location during business operation hours.
- Proper Identification tags shall be available at all times.
- Itinerant Merchant operation hours are from 6:00am to 12:00am for 5 days a month. **Applicant Initials** _____.
- Peddlers may only sell between the hours of 9:00am to 6:00pm for 5 days a month. **Applicant Initials** _____.

The following are exempt from permit fees and shall comply with all City Ordinance and State Laws that apply.

- Farmers who sell agricultural product that were raised or grown by them and are not refined.
- Educational organizations addressed within the Atascosa County.
- Register 501(C) (3) Non-profit organizations addressed within the Atascosa County.
- Vendor who operates and complies with the Food Cottage Law.

INCOMPLETE APPLICATION WILL NOT BE ACCEPTED

Registration valid for one calendar year (January 1st -December 31st), fee is required at the time of registration and shall not be Pro-rated. Permit will become null and voided December 31st at 11:59 pm and must renew if applied after January 1st if you continue to operate within the City of Pleasanton. **Applicant Initials** _____.

I hereby consent to all necessary inspections and information that is required for the issuance of the vendor permit and will provide any additional information as requested. I will operate and comply with all applicable requirements as required by the City of Pleasanton, Ordinance #19-1226 and any ordinance that may be pursuant to the operation of my business. I understand I will be subject to penalties up to \$500.00 for each day each violation exists and that my permit may be revoked or denied for non-compliance or falsification of the information provided.

I certify all information provided is true and correct. **Applicant Initials** _____.

PRINT NAME:	DATE:	PERMIT FEE	=\$200.00
SIGNATURE:	DATE:	ADMIN. FEE +1% TECH FEE	= \$7.05
APPROVED BY:	DATE:	TOTAL COST=\$207.05	



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Restroom Facility Agreement

All City of Pleasanton Mobile Food Vendors are required to submit and maintain a current Restroom Facility Agreement for each location where the mobile unit will operate for longer than two (2) hours.

Upper Portion: Mobile Food Vendors that intend to access restroom facilities of a store front or other similar establishment must have the top portion of this form signed by the owner or responsible party of that establishment.

Lower Portion: Mobile Food Vendors that intend to access portable restroom facilities must have the bottom portion of this form signed by the owner or responsible party of the Mobile Food Vendor.

Fixed Establishment Restroom Facility Agreement

I, _____, owner/responsible party for _____
Name of Business Owner (printed) Name of Business (printed)

located at _____ give permission to _____
Business Address (printed) Name of Mobile Owner (printed)

of _____ to use my restroom facilities for their employees during the
Name of Mobile Vending Unit (printed)

mobile unit's hours of operation. I understand that observations of inaccessibility to my restroom facilities during the mobile vendor's hours of operation, restroom facilities greater than 150 feet from mobile unit or sewage violations may result in this agreement being rescinded by the City of Pleasanton Community Development Services Department.

Signature of Business Owner Printed Name of Business Owner Contact Phone Number Date

Signature of Mobile Vending Unit Owner Printed Name of Mobile Vending Unit Owner Date

Portable Restroom Facility Agreement

I, _____, owner/responsible party for _____
Name of Mobile Vending Unit Owner (printed) Name of Mobile Vending Unit (printed)

will adhere to the requirements of the Restroom Facility Agreement when in operation for two (2) consecutive hours or more at a single location. I will adhere to this requirement through the use of a portable restroom facility to be located at

_____ which will be routinely serviced by
Address of Portable Restroom Location

_____ and will be located and maintained in adherence to all local zoning and code
Printed Name of Liquid waste Hauler Company

regulations. I understand that observations of inaccessibility to my restroom facilities during the hours of operation, restroom facilities greater than 150 feet from mobile unit or sewage violations may result in this agreement being rescinded by the City of Pleasanton Community Development Services Department.

Signature of Mobile Vending Unit Owner Printed Name of Mobile Vending Unit Owner Date