

CITY OF BRYSON, TEXAS
SOLICITATION / ITENERANT VENDOR APPLICATION

Type of Permit: ☐ Door to Door Solicitations
☐ Handbills
☐ Non-Residential Solicitation

Type of Organization: ☐ Non-Charitable
☐ Charitable
☐ Food Truck

☐ Charitable Solicitation in a Roadway
Location: _____

Application is made on behalf of: (Check One)
Self _____ Partnership _____ Corporation _____ Association _____

To sell the following product/service: _____

If selling products, designate if perishable: Y____ N____
has FDA declared such products potentially hazardous: Y____ N____

If you are a Charitable Organization, how will funds collected be used? _____

Name of Company: _____
Name and Title of Person in Charge of the solicitation: _____
Permanent Address: _____
City/State: _____ Zip Code: _____ Telephone #: _____

Applicant Name: _____ Date: _____
Local Address: _____
City/State: _____ Zip Code: _____ Local Telephone #: _____
Permanent Address: _____
City/State: _____ Zip Code: _____ Local Telephone #: _____
Drivers License # / State Issued: _____ Date of Birth: _____
Emergency Contact (Name & Telephone#): _____

Start and End Dates of Solicitation: _____

(NOTE: Permit valid for 90 days only. If additional time is desired, you must apply for new permit.)

List the last four (4) communities in which business was conducted by the individual, firm, company, or organization presented, with the period covered (beginning and ending month/year).

a. Community: _____ Month: _____ Year: _____
b. Community: _____ Month: _____ Year: _____
c. Community: _____ Month: _____ Year: _____
d. Community: _____ Month: _____ Year: _____

1. Have you ever been convicted of a violation under any law pertaining to soliciting or peddling? Yes ☐ No ☐
2. Have you ever had a solicitor's/peddler's license revoked? Yes ☐ No ☐
3. Have you, other than traffic violations, ever been convicted of a crime? Yes ☐ No ☐

I, _____, am of majority age and have read and fully understand the foregoing application. There are no willful omissions, misrepresentations, or falsifications in the information provided. I also certify by my signature affixed below, that I understand it is prohibited to sell, solicit or take orders on any property within the City Limits of the City of Bryson if a sign is posted which says "NO SOLICITORS" and to violate such will subject me to criminal prosecution.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Signature of Applicant

Date of Application

FOOD VENDORS: Applicant shall secure to this form a statement from a licensed physician, not more than 10 days prior to date of application, certifying applicant is free of any contagious or communicable disease.

Office Use Only

Background Check Info.

People Search Records

☐ Found ☐ Not Found

Criminal Record

☐ Found ☐ Not Found

Search Completed by: _____

Permit

☐ Approved ☐ Disapproved

By: _____
Designated City Representative

Permit No. _____

Exp. Date: _____

Receipt No. _____