

**CITY OF HOMER
ITINERANT MERCHANT LICENSE APPLICATION**

Name: _____ Date of Birth: _____

Driver's License Number/State: _____ Social Security Number: _____

Local Address: _____ Telephone No: _____

Legal Address: _____

Doing business as: _____

Describe goods to be sold: _____

If applicable – products of farm or orchard: produced/grown by applicant? Yes No

Length of time required to do business: _____

Where will business be located: _____

Vehicle to be used:

Alaska License No: _____ Vehicle Year: _____

Vehicle Make: _____ Vehicle Model: _____

Registered Owner: _____ Vehicle Color: _____

Have you ever been convicted of any felony, misdemeanor or violation of any municipal, state or federal ordinance? Yes No If yes, please explain:

I do hereby affirm that the statements and information contained on this application are true and correct and honestly represent the facts. I further agree to hold the City of Homer harmless against all claims of whatever kind, including legal costs, resulting from the business activities carried on under this itinerant merchant license. I understand that making a false statement on this form is a criminal offense, punishable as a misdemeanor under A.S. 11.56.210(a)(2).

SIGNATURE

DATE

Assistant(s) or sub-permit associate(s) are permitted per HMC 8.8.04(3) at a cost of \$10 each. Please complete Associate License Information sheet attached.

OFFICE USE ONLY

Attachments submitted with application:

- ✂ Current Alaska State Business License
- ✂ Kenai Peninsula Borough Sales Tax Registration
- ✂ Good Character/Business Responsibility Statements
- ✂ Proof of Insurance
- ✂ Criminal History Background Check

APPROVED

DISAPPROVED

COMMENTS: _____

SIGNATURE OF CHIEF OF POLICE

DATE

PERMIT NUMBER:	_____
Fees Paid --	_____
Application Fee:	\$10.00
License Fee:	_____
Associate Fee:	_____
Total Paid:	_____
Date Issued:	_____
Expiration Date:	_____

**THIS ENTIRE DOCUMENT MUST BE RETURNED TO THE
POLICE DEPARTMENT PRIOR TO LICENSE ISSUANCE.**

