

**VILLAGE OF PECATONICA
 PEDDLER, SOLICITOR OR ITINERANT MERCHANT PERMIT APPLICATION**

Background checks are required

NAME: LAST, FIRST, MI		MAIDEN NAME		NICKNAME-ALIAS	
SEX	HAIR	EYES	HEIGHT	WEIGHT	DATE OF BIRTH
PERMANENT ADDRESS		CITY	STATE	ZIP	PHONE NUMBER
LOCAL ADDRESS, IF DIFFERENT		CITY	STATE	ZIP	PHONE NUMBER
DRIVERS LICENSE #		STATE OF ISSUANCE		BUSINESS NAME	
BUSINESS ADDRESS		CITY	STATE	ZIP	PHONE NUMBER
DESCRIPTION OF BUSINESS & GOODS TO BE SOLD			HOW LONG DO YOU WISH TO ENGAGE IN ACTIVITY?		
HAVE YOU EVER BEEN CONVICTED OF A FELONY, YES OR NO IF YES, WHAT, WHEN & WHERE WAS THE CONVICTION FOR?					
Do you use a vehicle in conjunction with your business? If so, provide the requested information below.					
MAKE		MODEL		COLOR	
LICENSE NUMBER		STATE OF REGISTRATION		TYPE OF VEHICLE	
You must furnish an Illinois State Sales Tax Number and a Federal ID Number. Please furnish all the requested information in the space provided below. Do you sell perishable products? YES or NO If so, you must also provide a copy of the Winnebago County Health Department permit.					
ILLINOIS SALES TAX NUMBER		FEDERAL ID NUMBER		WINNEBAGO COUNTY HEALTH DEPT PERMIT NUMBER	
I understand that failure to complete this form completely, failure to disclose or the falsification of information shall be grounds for the denial of the permit requested. I certify that the foregoing information is complete and true.					
PRINT NAME			APPLICANT'S SIGNATURE		
FOR VILLAGE USE ONLY FEE PAID			FEE ACCEPTED BY:		
BACKGROUND INVESTIGATION COMPLETED BY:					
PERMIT	ISSUED	REFUSED	REASON REFUSED		
PERMIT ISSUED BY:					