



ITINERANT MERCHANT/PEDDLERS (MOBILE FOOD SERVICE) LICENSE APPLICATION

NAME OF APPLICANT: _____ **COMPANY NAME:** _____
TITLE OF APPLICANT: _____ **MAILING ADDRESS:** _____
TELEPHONE NUMBER: _____
FED TAX ID #: _____
DRIVER LICENSE #: _____ (State Of Incorporation) _____

STILLWATER SALES ADDRESS: _____ **NAME OF PROPERTY OWNER:** _____

NAME(S) & PERMANENT ADDRESS(ES) OF MANAGER(S)/SUPERVISOR(S) OPERATING/SELLING IN STILLWATER:

DATES TO CONDUCT BUSINESS: _____

TYPE OF ADVERTISING PLANNED: _____
(Handbills, newspaper, radio, etc.)

HAS THE APPLICANT/MANAGER/SUPERVISOR BEEN CONVICTED OF A CRIME, MISDEMEANOR, OR VIOLATION OF MUNICIPAL ORDINANCE? YES NO

IF YES, LIST NATURE OF OFFENSE AND PUNISHMENT ASSESSED:

Applicant's Signature

Date

LOCAL RESIDENTIAL ADDRESS (If Any):

LICENSE WILL BE VALID FOR ONE YEAR FROM DATE OF ISSUE, UNLESS REVOKED.

REQUIRED ATTACHMENTS:

1. **COPY OF OKLAHOMA SALES TAX PERMIT.**
2. **ORIGINAL PEDDLER/ITINERANT MERCHANT SURETY BOND IN THE AMOUNT OF TWO THOUSAND DOLLARS (\$2,000.00).**
3. **FEE: STILLWATER RESIDENT - SEVENTY-FIVE DOLLARS (\$75.00)
 NON-RESIDENT – TWO HUNDRED FIFTY DOLLARS (\$250.00)**
4. **COPY OF FOOD SERVICE ESTABLISHMENT LICENSE ISSUED BY THE PAYNE COUNTY HEALTH DEPARTMENT. (A COPY OF THE *RENEWAL* FOOD SERVICE ESTABLISHMENT LICENSE SHALL BE PROVIDED TO THE CITY CLERK WITHIN 30 DAYS OF RECEIPT DURING THE TERM OF THE LICENSE.)**

Deliver application to the following address or call for assistance:

**City of Stillwater
City Clerk
P. O. Box 1449
723 South Lewis
Stillwater, OK 74076
Tel: 405-742-8243
Fax: 405-742-8208**