



City of Leavenworth
 100 N. 5th Street
 Leavenworth, KS 66048
 913-682-9201 Fax: 913-651-7143
 www.lvks.org

TRANSIENT MERCHANT
 PEDDLER/SOLICITOR
APPLICATION

Date: _____

Per Day \$50.00 **Per Week \$250.00 – Peddler/Solicitor Only**

The undersigned hereby makes application for a Transient Merchant & Peddler Permit in the City of Leavenworth, Kansas under the provisions of the Code of Ordinances, Chapter 78 (Peddlers and Transient Merchants).

Applicant Name: _____

Applicant Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Location Address: _____ Date/Dates - From: _____ To: _____

Representing Company: _____

Company Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Brief description of the nature of the business and goods to be sold: _____

Have you ever been convicted of any crime involving moral turpitude or any felony charges: Yes No

Transient Merchant Only – Location or Building _____

Vehicle to be used – Make: _____ Model: _____ Color: _____ Vehicle License #: _____ State: _____

By signing I agree to comply with the City of Leavenworth Code of Ordinances, Rules, or Regulations pertaining to Transient Merchants and Peddler /Solicitors that govern the license.

Applicant's Signature: _____ Date: _____

FOR OFFICE USE ONLY

Transient Merchant (SOL/SOL3) Peddler/Solicitor Per Day (SOL/SOL1) Peddler/Solicitor Per Week (SOL/SOL2)
 Copy of Kansas Sales Tax Certificate Copy of Driver's License

Transient Merchant & Peddler/Solicitor Permit # _____ Print Permit

Business License Acct. #: _____ Bill #: _____

Date: _____ City Clerk's Office Staff Received by: _____