

VENDOR LICENSE APPLICATION

Date: _____

I hereby make application for permit to become a vendor in the City of Eldora, Iowa.

I agree to conform to all city ordinances, rules, and regulations relating thereto now or hereafter in force by the City. Solicitor hours are between 8:00am and 7:00pm.

Applicant

Name of Business: _____

Nature of Business: _____

Address: _____

Name of Applicant: _____

Phone No: _____

Dates to be in Eldora: _____

Other employees authorized to do business for this applicant:

Name: _____

Name: _____

Address: _____

Address: _____

Vehicle: _____

Vehicle: _____

Year, make, color

Year, make, color

Name: _____

Name: _____

Address: _____

Address: _____

Vehicle: _____

Vehicle: _____

Year, make, color

Year, make, color

Along with this application, you will need proof of general liability insurance with the minimum amount of \$500,000, a license fee of \$25, and the license will expire on December 31 each year and will need to be renewed before that date for the following year.

Approved by City of Eldora:

State Public Health License No.

David W. Dunn, Mayor