DATE_	FILE NO
	ITINERANT VENDOR LICENSE APPLICATION
1.	NAME AND ADDRESS OF APPLICANT
	IF OTHER THAN APPLICANT, NAMESAND ADDRESSES OR OWNERS OF PERSONS IN WHOSE INTEREST SUCH BUSINESS IS CONDUCTED
2.	GIVE A BRIEF DESCRIPTION OF BUSINESS
3.	ADDRESS OR PROPERTY DESCRIPTION WHERE BUSINESS IS LOCATED
4.	PLACES AND DATES WHERE APPLICANT HAS BEEN ENGAGED IN BUSINESS FOR THE PAST 18 MONTHS (ATTACH SEPARATE SHEET IF NECESSARY)
5.	NAMES AND ADDRESSES OF THE PERSONS, FIRMS OR CORPORATIONS FROM WHOM GOODS OR MERCHANDISE WERE LAST OBTAINED. (ATTACH SEPARATE SHEET IF NECESSARY)
6.	GIVE ALL DETAILS NECESSARY TO LOCATE EXACTLY AND TO FULLY IDENTIFY ALL GOODS OR MERCHANDISE TO BE SOLD. (ATTACH SEPARATE SHEET IF NECESSARY)
7.	IF PROPERTY IS OWNED BY OTHER THAN APPLICANT, ATTACH COPY OF LEASE OR STATEMENT GRANTING PERMISSION TO USE.
8.	DATES OF OPERATION (MAXIMUM OF 21 DAYS)
9.	ATTACH SURETY BOND IN THE SUM OF ONE THOUSAND DOLLARS (\$1000.00) EFFECTIVE FOR AT LEAST ONE YEAR FROM THE DATE OF LICENSE.
	I/WE, THE UNDERSIGNED DO HEREBY SWEAR THAT THE ABOVE FACTS AND STATEMENTS ARE TRUE.
	APPLICANTS SIGNATURE
FEE \$5	0.00 PER WEEK OR FRACTION THEREOF.
	TOWNSHIP APPROVAL
DIRECTO	OR OF PUBLIC SAFETY (COMMENTS)
SIGNAT	URE/DATE
	IG AND ZONING ADMINISTRATOR (COMMENTS)
SIGNAT	URE/DATE

1-30-13 dsb

TOWNSHIP CLERK (SIGNATURE/DATE)