CITY OF DALTON
APPLICATION FOR TRANSIENT MERCHANTS

***Applicant Information*:**

Transient: _____
First Middle Last

Date of Birth:_____ Social Security No.:_____

Residence Address:_____
Street name and number (NO P.O. boxes, please)

City:_____State:_____ Zip Code:_____

Telephone No.: _____
Home Work Cell

***Employer Information Organization & Company*:**

Name:_____

Address:_____
Street name and number (**NO P.O. boxes, please**)

City:_____State:_____ Zip Code:_____

Telephone No: _____
Home Work Cell

Product Type & Manufacturer:_____

Number of employees in the company who plan to be engaged in Dalton:_____

Date & Time of Operation:_____(**7 day limit)**

(a) A transient merchant shall not locate and conduct a business from a mobile vehicle or upon the public sidewalks, streets, alleys, walkways, parks, parking lots, within 50 feet of rights-of-way, or other public lands of the city or within 50 feet of state rights-of-way within the city limits.

(b) Time of operation is limited to the hours between 10:00 a.m. and 6:00 p.m.

Proposed method of operation:_____

_____

_____

Proof of Occupation Tax Certificate:_____

Applicant's Signature: _____

Date: _____