



## Itinerant Merchant's Permit Application

Please read the following instructions and information to ensure timely receipt of your permit. For complete details, please review our [Code of Ordinances Chapter 26, Article IV](#).

1. An application provided to the City Clerk must be completed in detail with the required information:
  - Full name of applicant (individual or other entity)
  - Date of birth of applicant or individual applying on behalf of non-individual applicant
  - Address of applicant or address of headquarters of non-individual applicant. If applicant is not an individual, please also indicate the state in which the entity is organized
  - Social security number, driver's license, or state identification number of individual applicant or employer identification number if applicant is not an individual
  - Valid copy of sales and use tax permit issued by the Texas Comptroller or sworn certification by applicant that the items to be sold are exempt from sales and use tax
  - Occupation in which applicant desires to engage and for which the permit is desired
  - Full and complete description of the goods, wares, merchandise or other personal property or the services which the applicant desires to sell. This includes the grade, quality and character of the property or services to be sold. Further description, depending on the nature of the property, may be required by the City Clerk
  - Description and license number of all vehicles to be used
  - Address where applicant will conduct temporary business
  - Applicant's signature if an individual, or partner's signature if a partnership, by the president or vice-president if a corporation, or by an authorized officer if an association (please include title)
2. Attachments:
  - If the applicant is an individual working for a company, you shall provide a certificate or letter from the president, vice-president, general manager, sales manager, assistant sales manager, district or area manager stating that the applicant is an employee and/or agent of such company
  - If the applicant is other than an individual, you shall provide names and permanent addresses of all employees to be working under this permit
  - You shall provide a reference letter or report from the Better Business Bureau or the Chamber of Commerce of the county in which the applicant resides or business is located
3. Fees:
  - \$30 per permit
  - \$30 for each additional location

### Additional Information:

- ❖ The sponsoring organization of a multiple vendor event will complete the application. Within three days of completion of the event, you will provide the City Clerk a complete list of names, permanent addresses, taxpayer numbers (or certifications of exemption) and types of product sold by each merchant operating under this permit.
- ❖ The name of the applicant and person signing the application must also be the same person reflected on reference letters and all documents submitted to the City Clerk.
- ❖ Allow at least 7-10 business days to process the application. We cannot guarantee any applications requiring a start date sooner than 7-10 business days will be available by your requested start date.
- ❖ This permit will expire December 31 of the year in which the application was received.
- ❖ Sales or soliciting in public parks is not covered by this permit. You must contact Parks and Recreation at 940-761-7490.
- ❖ Other permits may be required from the Health Department, depending on merchandise being sold. You can contact them at 940-761-7800.
- ❖ Payment forms accepted: cash, check, or money order made out to the City of Wichita Falls.

Please return this form to the City Clerk's Office at 1300 7<sup>th</sup> St Room 104 Wichita Falls, TX 76301 or via email at [city-clerk@wichitafallstx.gov](mailto:city-clerk@wichitafallstx.gov)



Desired Permit Start Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Date of Birth: \_\_\_\_\_

Identification number: \_\_\_\_\_ Type:

Applicant Phone Number: \_\_\_\_\_

Applicant Email Address: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Address where temporary business will be conducted: \_\_\_\_\_

Occupation you will be engaging in:

Please give a complete description of all merchandise, personal property, or services you wish to sell including details of grade and character:

Description of Vehicle:

State and License Plate Number:



I have read the above instructions and information.

I have provided the following:

- Valid copy of sales and use tax permit or sworn certification of exemption
- Certificate or letter stating applicant is an employee or agent (if applicable)
- List of all employees and permanent addresses (if applicable)
- Reference letter or report from Better Business Bureau or Chamber of Commerce from your local county

I hereby declare that the above information is correct and true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

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Office Use Only

City Clerk: \_\_\_\_\_

Date: \_\_\_\_\_