

City of Kemah, Texas Department of Community Services

PEDDLER/SOLICITOR APPLICATION

Permit # _____

Applicant's Name: Weight: Weight:		Date of Birth:					
		Hair Color:	Eye	Eye Color:			
Drive	er's License #:	_ State	of Issuance:	Social Sec	curity #:		
Home Address:			City:		State:	Zip	
	Phone #:_			_			
Company Represented:			Type of	Type of Sales:			
Company Address:			City:		State:	Zip	
Corp	orate Office Telephone #:		_				
Loca	tion and manner in which wares w	vill be exh	ibited:				
	es that wares will be exhibited:						
res:	No:	<u> </u>	ER REQUIREMEI	NTS			
	Written approval from subject pr	operty ow	ner (if applicable)				
	Two recent photographs of the applicant and of each person to whom a licensed identification badge will be issued.						
	A copy of the appropriate current sales tax registration or permit showing all sales taxes generated and collected by the applicant within the city will properly credit the city as the point of sale.						
	Copies of all state health permit	s and insp	pections, if required	d, for specific s	ales of foodst	uff.	
	The applicant shall file with the applicant. It may be a surety bond						
unde	eby certify that I have read and exami erstand that the site in question shall	be in com	pliance with the p				
ordir	nances pertaining to the operation of	business ir	n the city.				
Signature(s):			Fee:	\$			
Date:			Payment Type:				
				Payment Date:			
5011	CE DEDT ADDROVAL.	D.4.T.F.					