



**TRANSIENT MERCHANTS**

**PERMIT APPLICATION**

If multiple individuals are representing a company, this section should be completed by the owner/supervisor of the group.

**Fee's: \$10.00 - One Day      \$25.00 – One Week      \$75.00 – One Month      \$500.00 – One Year**

Company Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Owner/Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Location Address: \_\_\_\_\_ Site/Location map Included: **YES / NO**

\_\_\_\_\_   
 Proof State Sale Tax

\_\_\_\_\_   
 State Tax ID #

\_\_\_\_\_   
 Exemption from State/Federal Tax

What motor vehicles/trailers will be used in connection with the conduction of business?

\_\_\_\_\_   
 Make

\_\_\_\_\_   
 Model

\_\_\_\_\_   
 Color

\_\_\_\_\_   
 License Plate #

List the last three places you've engaged in similar activity- City and State:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Provided Proof of liability insurance with a minimum amount of \$1,000,000.00. \_\_\_\_\_

Date Business will Commence: \_\_\_\_\_ Date Business will Terminate: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**City Official Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved:** \_\_\_\_\_ **Denied:** \_\_\_\_\_

Submit your completed application to: [cityclerk@orangecityiowa.com](mailto:cityclerk@orangecityiowa.com).

City of Orange City

C/O City Clerk

125 Central Ave. SE

Orange City, IA 51041

city of orange city

phone: 712.707.4885

fax: 712.707.4351

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