



# City of Jeffersonville

## Vendor Application

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

### Applicant Information

Full Name: \_\_\_\_\_  
*Last First M.I.*

All other names under which the applicant conducts business or to which applicant officially answers:

\_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City*

*State*

*ZIP Code*

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Social Security # \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Physical Description of Applicant:

Height : \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color \_\_\_\_\_

Eye Color \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Distinguishing marks and/or features: \_\_\_\_\_

### Information concerning Company/Organization

Company/Organization Name : \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City*

*State*

*ZIP Code*

Any & All Telephone # for Company / Organization: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Description of goods and/or services to be offered: \_\_\_\_\_

**Information concerning Company / Organization (cont'd)**

Duration of License Requested: From \_\_\_\_\_ To \_\_\_\_\_

Additional address & telephone #'s where applicant can be reached while conducting business within the City

Location where business to be set up \_\_\_\_\_

Duration of Operation: \_\_\_\_\_ (week, month or year)

Days of Operation (Mon-Sun) \_\_\_\_\_

Times of Operation \_\_\_\_\_

**Vehicles to be used in the transaction of business or transportation of employees**

**(Include All vehicles):**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate Number: \_\_\_\_\_

**Criminal History**

**Have you, the applicant, been convicted of any felony, gross misdemeanor, misdemeanor, or violation of any state or federal laws in the last five (5) years? YES NO If yes, explain below:**

Date \_\_\_\_\_ Offense \_\_\_\_\_ Arresting Agency \_\_\_\_\_ Disposition \_\_\_\_\_

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Date \_\_\_\_\_ Offense \_\_\_\_\_ Arresting Agency \_\_\_\_\_ Disposition \_\_\_\_\_

**List any pending criminal charges against applicant:** \_\_\_\_\_

**List three (3) most recent locations where the applicant has conducted business as a door-to-door merchant or transient merchant.**

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge. I affirm under penalties of perjury that the foregoing representations are true to the best of my, information and belief, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.*

*I do hereby authorize the City of Jeffersonville to search any and all records available for a complete background check.*

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

**Applicant must provide proof of any requested state or county license, if required.**

**Applicant must provide written permission of the property owner or the property owner's agent for any location to be used by a transient merchant.**