Village of Birchwood PO BOX 6 101 N. Main Street Birchwood, WI 54817



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## **VENDORS PERMIT APPLICATION**

Direct Sellers, Peddlers & Mobile Food Vendor License Application

Name of Applicant:	Date of Birth:
Address:	
Mailing Address:	
Drivers License #	Expiration Date:
Drivers License # Telephone	Number:
Proof of Wisconsin Seller's Permit (attach):	
Company Federal ID #:	
(must provide if sellers permit is under business name &	business is registered with federal ID number)
Provide information regarding the person or company yo merchandise is being sold:	
Name:Address:	
Address from which sales will be made:	(attach letter of permission)
Product, produce or goods to be sold:	
Have you ever been convicted of any crime, statutory vio at any time? □ Yes □ No If yes, give nature of offense(	•
It shall be a condition of holding a license under Village O ordinances and rules and regulations of the Village of Bird of your license. Any False statement on this application versets contained herein.	chwood. Failure to do so shall be cause for revocation
OFFICE USE ONLY	
Date Received: Permit #	_
Date Paid: Receipt #	-
Permitted: Yes No to	Administration Fee: \$25.00
<del></del>	Vendor Fee: \$100/annual