



## **City of Lebanon Peddler/Solicitor/ Transient Vendor/ Ag Vendor Application Information**

To obtain a City of Lebanon Peddler, Solicitor, Transient Vendor, or Ag Vendor Permit you must complete the attached application and turn it in to the City of Lebanon Business Tax Office. In addition to turning in the application, we must have a copy (front & back) of everyone's Photo ID.

All Peddler, Solicitors, & Ag Vendors are prohibited from knocking on the doors of any addresses that are on the City of Lebanon's Do Not Solicit registry. A current list of the registry is available when you apply for a permit. You will be provided 1 copy of the Do Not Solicit Registry when your permit is issued. If you need more copies of the Do Not Solicit Registry, it will cost \$10 per copy.

Door-to-door selling is always prohibited before 9am. It is prohibited after 6:30pm during Central Standard Time and after 7:30pm during Daylight Savings Time.

Transient Vendors are for any person who brings onto temporary premises stocks of merchandise or a service to the public.

For any questions, contact the Business Tax Office at 615-444-4905.

See Chapter 2 in the City of Lebanon Ordinance for more definitions.

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### **Permit Fees**

**Solicitor Fee: \$50 for 5 consecutive days**

**Peddler Fee: \$50 for 5 consecutive days**

**Transient Vendor Fee: \$50 for 14 consecutive days**

**Ag Vendor Fee: \$50 for 6 months or \$100 for a year**



## Application for Peddler/ Solicitor/Transient Vendor/ Ag Vendor

Application for (check one):

\_\_\_ Peddler Permit

\_\_\_ Transient Vendor Permit

\_\_\_ Solicitor Permit

\_\_\_ Ag Vendor Permit

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1. Business Name: \_\_\_\_\_

2. Business Address: \_\_\_\_\_

3. Business Mailing Address: \_\_\_\_\_

4. Business Telephone Number: \_\_\_\_\_

5. Business Email Address: \_\_\_\_\_

6. Name of Business Owner: \_\_\_\_\_

7. Address of Business Owner: \_\_\_\_\_

8. Social Security Number of Business Owner: \_\_\_\_\_

9. Description of the type of business: \_\_\_\_\_

10. Brief Description of the nature of the business and goods to be sold: \_\_\_\_\_

11. Date(s) you intend to conduct your business or make solicitation: \_\_\_\_\_

12. Location where you will conduct business (Name of Building and Street Address):  
\_\_\_\_\_

13. Tennessee State Sales tax number if applicable. If sales number is from another State, please include the name of the State beside the number:  
\_\_\_\_\_

**14. List the last three (3) cities or towns where you have conducted business:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**15. For each person that will be making sales or solicitations within the city limits:**

1. Name: \_\_\_\_\_

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

2. Name: \_\_\_\_\_

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

3. Name: \_\_\_\_\_

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

4. Name: \_\_\_\_\_

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

5. Name: \_\_\_\_\_

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

**\*If there are more than 5, please attach a list of the names and their permanent address to this application.**

**15. For each vehicle used to make sales or solicitations:**

_____ Make	_____ Model	_____ Complete Description	_____ License Tag No.	_____ State
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_____ Make	_____ Model	_____ Complete Description	_____ License Tag No.	_____ State
_____ Make	_____ Model	_____ Complete Description	_____ License Tag No.	_____ State
_____ Make	_____ Model	_____ Complete Description	_____ License Tag No.	_____ State

**\*If there are more than 5 vehicles, please attach a list of the make, model, complete description, license tag number, and state to this application.**

The Statements made in this application are true to the best of my knowledge and belief. (This application must be signed by the individual/owner, partner, officer, or representative of the business/company/organization listed above.

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Title of Representative

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Driver License Number of Representative

\_\_\_\_\_  
SSN of Representative