

City Of Bushnell Permit

LETTER OF APPLICATION TO SOLICIT TRADE

NAME: _____

ADDRESS: _____

PHONE: _____

OWNER OF THE BUSINESS: _____

BUSINESS TYPE: _____

NATURE OF BUSINESS: _____

DATES OF SOLICITATION: _____

HOURS OF SOLICITATION: 9:00 a.m. TO 7:00 p.m.

NAMES OF SOLICITATION: _____

TAX NUMBERS: STATE _____ FEDERAL _____

VEHICLE MAKE & MODEL: _____

LICENSE PLATE NUMBER: _____

DATE: _____ DAILY FEE \$25.00 PAID: _____

DATE: _____ MONTHLY FEE \$200.00 PAID: _____

DATE: _____ YEARLY FEE \$500.00 PAID: _____

PLEASE SUBMIT YOUR LICENSE FOR COPY ON THE BACK OF THIS PAGE

THANK YOU,

Robin L Wilt, Mayor

Tashina Bradford, City Clerk

Solicitors Signature