

**TITTABAWASSEE TOWNSHIP**  
**PEDDLER'S PERMIT APPLICATION**

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

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

Permanent home address: \_\_\_\_\_

Phone# \_\_\_\_\_ How long at above address? \_\_\_\_\_

Driver's License # \_\_\_\_\_

Physical description of applicant:

Height \_\_\_\_\_

Weight \_\_\_\_\_

Hair Color \_\_\_\_\_

Eye Color \_\_\_\_\_

Dist. Marks \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Manner intended to travel, trade, and/or conduct business: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

I, \_\_\_\_\_, the undersigned hereby make application for a Peddler's License, under the provisions of Tittabawassee Township Ordinance #04-05, Sec. 3.4 and submit the above facts in support thereof.

\_\_\_\_\_  
Signature of Applicant

*For Office Use Only*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TWO (2) PICTURE I.D.'S**  
**FEE AMOUNT (\$50.00) PAID**  
**POLICE DEPARTMENT APPROVAL**  
**NAMES AND ADDRESSES OF EVERY PERSON SOLICITING**