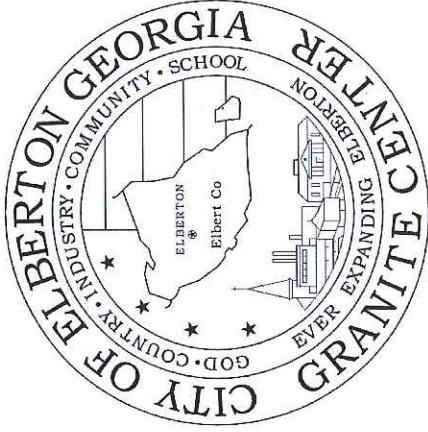


CITY OF ELBERTON



APPLICATION FOR **NON-PROFIT** PEDDLER'S LICENSE

**PO BOX 70
203 ELBERT ST
ELBERTON, GA 30635**

An Ordinance to create and establish rules and regulations for licensing peddlers, solicitors, transient merchants and mobile vendors within the City of Elberton, Georgia.

The Mayor and Council of the City of Elberton, Georgia as a matter of public policy deem it necessary to protect the health, safety and welfare of the citizens of Elberton, Georgia by regulating conduct of street and door-to-door solicitation and canvassing.

The entire code may be found at www.cityofelberton.net
Code of Ordinances, Chapter 10 Businesses, Section 10-2.

Applications for a permit shall be made upon a form provided by the City of Elberton; the City Manager or his designee shall provide applications to a desiring applicant; and an application for a permit shall be made at least fourteen (14) days before the applicant desires to begin conducting his or her business.

Applications are available by contacting the City Clerk at 706-213-3105, cchurney@cityofelberton.net, 203 Elbert Street, Elberton, GA 30635.

Address questions to Jeff Algood, City Marshal, 706-213-3104, jalgood@cityofelberton.net.

PERMIT #: _____

CITY OF ELBERTON
 APPLICATION FOR PEDDLERS PERMIT
NON-PROFIT
 P. O. BOX 70
 ELBERTON, GEORGIA 30635

Permit Fee: (Event maximum 30 days)	\$15.00	<input type="checkbox"/>
Beginning		
Ending		

Application for a NON-PROFIT permit shall be made at least fourteen (14) days before the applicant desires to begin conducting his or her business within the City of Elberton, Georgia. The following information must be completely and accurately supplied by the applicant.

APPLICANT INFORMATION:		
1.	Full Legal Name of Applicant (first, middle, last):	
2.	Home Street Address:	
3.	City, State, Zip	
4.	Home Phone Number	Mobile Phone Number
5.	Driver's License Number (attach copy)	
ORGANIZATION INFORMATION:		
6.	Name of Organization	
7.	Permanent Location of Organization (Street Address)	
8.	City, State, Zip	
9.	Organization's Phone Number	Day Number (if different)
10.	<p>Copy of your articles of incorporation stating non-profit organization status. Your permit will not be issued until after this information is verified.</p> <p>Initial if document is attached _____. If not, please explain:</p>	
11.	<p>If food is cooked on site a permit must be obtained from the health department.</p> <p>Initial if document is attached _____. If not, please explain:</p>	

PRODUCT INFORMATION:			
12.	Brief description of nature of business and goods to be sold.		
13.	Proposed location you plan to solicit business. MUST NOT INTERFERE WITH TRAFFIC (written permission from property owner MUST accompany this application).		
VEHICLE(S) TO BE USED IN THE CITY OF ELBERTON DURING SOLICITATION (IF APPLICABLE):			
14.	License Plate Number	Make/Model	Color
15.	License Plate Number	Make/Model	Color
CRIMINAL HISTORY:			
16.	Have you ever been convicted of any crime, misdemeanor, violation of any municipal ordinance, other than traffic violations?		
17.	If yes, please list the offense, and the location and date of offense, for which convictions were had:		

I hereby certify that all information contained in this application is true and correct and I do hereby give my consent to a background check to be conducted by the City of Elberton Marshal at his discretion. I have also read and understand the rules and regulations governing this permit.

Applicant Signature: _____ Date: _____

City of Elberton

Affidavit Verifying Status for Public Benefit Application

By executing this affidavit under oath, as an applicant for a Peddlers License for the City of Elberton, Georgia, I am stating the following with respect to my application.

_____ I am a United States citizens OR

_____ I am a legal permanent resident 18 years of ages or older I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.*

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of violation of Code Section 16-10-20 of the Official Code of Georgia (O.C.G.A.).

Signature of Applicant

Date

Print Name

*Alien registration number for non-citizens