



# County of Tulare

221 S. Mooney Blvd. Room 104-E  
Visalia, CA 93291

Cass Cook · Treasurer-Tax Collector  
Paul Sampietro, CPA, Chief Deputy Treasurer-Tax Collector

Telephone: (559) 636-5250  
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## Application for Peddler/Itinerant Vendor Business License

*Under Tulare County Ordinance Code §6-25-1020*

The undersigned hereby applies for a Peddler/Itinerant Vendor Business License pursuant to all applicable Tulare County Ordinance Codes and makes the following statements:

**Applicant** (Must be an Owner, Officer, or Partner):

Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Residence Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Business** (the exact name and location of the business is as follows):

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

Business Type:  Sole Proprietor  Partnership  Corporation  Other: \_\_\_\_\_

List Names, Addresses and Telephone Numbers of Officers, Partners, or Managing Employees:

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

**Applicant Personal Description:**

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Sex \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Social Security No: \_\_\_\_\_ Driver's License No: \_\_\_\_\_

List complete Name, Address, and Telephone number of all employers for the past five years:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_

List complete Name, Address and Telephone Number of five (5) character references:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_

**Description of Vehicle(s) to be used in Business:**

1.) Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

License #: \_\_\_\_\_ Vehicle Registration #: \_\_\_\_\_

Any Advertising or Business markings on Vehicle: \_\_\_\_\_

Description of commodities to be sold: \_\_\_\_\_

Nature and capacity of food storage facility of vehicle: \_\_\_\_\_

\_\_\_\_\_

**Description of Vehicle(s) to be used in Business (continued):**

2.) Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

License #: \_\_\_\_\_ Vehicle Registration #: \_\_\_\_\_

Any Advertising or Business markings on Vehicle: \_\_\_\_\_

Description of commodities to be sold: \_\_\_\_\_

Geographic area(s) in which you propose to operate: \_\_\_\_\_

Additional permits held by applicant: \_\_\_\_\_

\*If applying for a military license fee exemption, complete the following:

Dates of Military Service: \_\_\_\_\_

Branch of Military served: \_\_\_\_\_

Discharge Status: \_\_\_\_\_

\*Attach copy of military discharge papers (form DD214 or equivalent)

The applicant states hereto, as indicated by initialing each statement:

1. \_\_\_\_\_ That he/she is the individual who will actively operate and conduct the business under this license
2. \_\_\_\_\_ That he/she is deemed to be the authorized agent of all interested parties for the purpose of receiving any notice required by the ordinance under which this application is made or any other notice in connection with this application or license applied for.
3. \_\_\_\_\_ That he/she has never been charged or convicted of any felony at any time except as detailed on the reverse side of this application.
4. \_\_\_\_\_ That he/she has not been convicted of any misdemeanor, excluding non-moving traffic violations, within the previous ten (10) years, nor has been charged with any misdemeanor, excluding non-moving traffic violations, within the previous five (5) years except as detailed on the reverse side of this application.
5. \_\_\_\_\_ That he/she nor any person participating in this business has been denied a license at any time for a PEDDLER/ITINERANT VENDOR license or had such a license suspended or revoked by the authorities of any County or City in the State of California, except as detailed on the reverse side of this application.

In case of an emergency, notify: \_\_\_\_\_

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I, \_\_\_\_\_, the undersigned, under penalty of perjury that I am the applicant, that I have read the foregoing application and know the contents thereof, and that the foregoing is true and correct of my own knowledge.

Executed on \_\_\_\_\_ at Visalia, CA 93291 \_\_\_\_\_  
(Date) (Signature of Applicant)

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RECEIPT is hereby acknowledged of the sum of Fifty-Two Dollars (\$52.00) from the above named applicant as the application fee provided for in §6-01-3000 of the Tulare County Ordinance Code.

**Cass Cook**

Auditor-Controller/Treasurer/Tax Collector

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

By: \_\_\_\_\_

Deputy Tax Collector  
Phone: 559-636-5250

**FEEES REQUIRED:**

Application	\$52.00
License	\$50.00 plus \$25/Vehicle per year
SB1186 fee	\$4.00

**Distribution:**

- a) Applicant
- b) Tax Collector
- c) Health & Human Services