## CITY OF UNDERWOOD

Phone 712-566-2373

PO Box 40, Underwood, Iowa 51576

Fax 712-566-2083

**Total Fee:** \$

## PEDDLERS, SOLICITORS, AND TRANSIENT MERCHANT LICENSE

			No		
Name of License Holder:			License #:		
Applicants Name:			<b>Telephone #:</b>		
Home Address	1				
City:		State:		Zip:	<b>-</b>
Business Addr Street:		G			_
City:		State:		Zip:	<b>=</b>
Nature of Busi	ness:				
Last Three Pla	ces of Prior Busin	ess:			
Month:	Year:	Name of Busin	ness:	State:	
Street:	1 car	Name of Bush	City:	State:	
Month:	Year:	Name of Busin	ness:	State:	
Street:			City:	State:	
Length of Lice	nse requested:	_ day(s)			
Fees: Per ord and 6:00 P.M.	inance 1202.10 all	licenses are in for	ce and effect on	y between the hours of 8	3:00 A.M.
For one For mo For one For mo			\$175 one month: <u>Com</u>	0 <u>0</u> 00 per day .00	

Applicant Signature:		Date:
Please submit bond filed wand Insurance information		ng to Chapter 9C of the Code of Iowa
Having complied with the o	rdinances and paid the sum of	dollars to City Hall, the holder is
hereby licensed to	within said city for a period of	of
This license is non-transfer Council.	Issued thisday City Administrator/C	
	Mayor	