

**CITY OF ATLANTIC, IOWA
23 EAST 4TH STREET
ATLANTIC, IA 50022**

**SOLICITOR'S LICENSE
PEDDLER'S LICENSE
TRANSIENT MERCHANT'S LICENSE**

APPLICATION FEE: \$50.00

**LICENSE FEES: \$25 PER DAY
\$125 PER WEEK
\$500 UP TO SIX MONTHS
\$750 SIX MONTHS TO ONE YEAR**

Date _____

1. Applicant's name: _____
2. Permanent address: _____
3. Local address (if any): _____
4. Business address (if any): _____
5. Employer's name (if any): _____
6. Nature of applicant's business: _____
7. Last three places of business: _____

8. Length of time for license: _____

**I HEREBY STATE THAT I HAVE RECEIVED A COPY OF THE ORDINANCE
GOVERNING SOLICITOR'S, PEDDLER'S AND TRANSIENT MERCHANT'S
LICENSES FOR THE CITY OF ATLANTIC, IOWA AND THAT I WILL ABIDE BY
THE RULES AND REGULATIONS STATED IN THE ORDINANCE.**

Applicant's signature