

**CITY OF LINCOLN, NEBRASKA
 PEDDLER PERMIT APPLICATION / VENDOR TRUCK APPLICATION**

APPLYING FOR - please mark one: _____ Peddler _____ Vendor Truck

APPLICANT'S INFORMATION				
NAME:				
PERMANENT STREET ADDRESS:				
CITY:		STATE:		ZIP:
PHONE #:		DOB:		
EMAIL:				
BUSINESS STATUS:	<input type="checkbox"/> Self Employed		<input type="checkbox"/> Employee	
HOW LONG DO YOU INTEND TO DO BUSINESS IN LINCOLN? <i>(Max. allowed is 1 year)</i>				

TEMPORARY LOCAL ADDRESS (IF APPLICABLE)			
NAME:			
STREET ADDRESS:			
CITY:		PHONE #:	

PHYSICAL DESCRIPTION OF APPLICANT					
Age:		Height:		Weight:	
				Hair Color:	
				Eye Color:	

EMPLOYER INFORMATION				
NAME:				
STREET ADDRESS:				
CITY:		STATE:		ZIP:
CONTACT PERSON:			PHONE #:	
EMAIL:				

NATURE OF BUSINESS TO BE CONDUCTED	

VEHICLE INFORMATION <i>(only pertains to Vendor Trucks)</i>			
YEAR:		MAKE:	
		MODEL:	
COLOR:		PLATE #:	

I HEREBY STATE THAT THE ABOVE AND FOREGOING INFORMATION IS TRUE AND CORRECT.

DATE: _____

SIGNATURE: _____

FOR OFFICE USE ONLY

Permit #:	Date Paid:	Issued by:
------------------	-------------------	-------------------