



CITY OF AKRON  
Treasury/License Division  
166 S High St, Room 505  
Akron, OH 44308  
(330) 375-2484

**ITINERANT RETAILER APPLICATION**  
(Please Print)

BUSINESS NAME \_\_\_\_\_ CITY OF AKRON  
INCOME TAX # \_\_\_\_\_

BUSINESS LOCATION/ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_

TYPE OF GOODS OFFERED FOR SALE \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_ TITLE \_\_\_\_\_

APPLICANT'S ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_

BIRTH DATE OF APPLICANT \_\_\_\_\_ SOC SEC # \_\_\_\_\_

FORM OF OWNERSHIP \_\_\_\_\_ SOLE PROPRIETORSHIP \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION

IF PARTNERSHIP OR CORPORATION IS CHECKED, LIST OFFICERS/PARTNERS:

NAME	ADDRESS	PHONE	TITLE
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NAME	ADDRESS	PHONE	TITLE
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EMPLOYEE INFORMATION:

NAME	ADDRESS	PHONE
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NAME	ADDRESS	PHONE
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HAS ANY PERSON WITH THE BUSINESS EVER BEEN ARRESTED? \_\_\_\_\_ YES \_\_\_\_\_ NO  
IF "YES" LIST ALL ARRESTS, DATES, PLACE, AND DISPOSITION OF EACH ARREST:

THE UNDERSIGNED STATES THAT ALL THE ABOVE INFORMATION IS TRUE. THE UNDERSIGNED ALSO ACKNOWLEDGES RECEIPT OF THE LICENSING ORDINANCE AND UNDERSTANDS THE PROVISIONS THEREIN. FALSIFICATION OF INFORMATION IS GROUNDS FOR DENIAL OF THE LICENSE.

\_\_\_\_\_  
SIGNATURE OF APPLICANT DATE

**PROPERTY OWNER'S CONSENT FORM  
ITINERANT RETAILER ORDINANCE**

I, \_\_\_\_\_, am the owner of the property  
located at \_\_\_\_\_ and do hereby give my permission  
to \_\_\_\_\_ to sell his goods, merchandise, etc  
from the above mentioned address from \_\_\_\_\_ to \_\_\_\_\_  
Property Owner's Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Itinerant Retailer's Name \_\_\_\_\_ License # \_\_\_\_\_  
Itinerant Retailer's Address \_\_\_\_\_  
Company Name \_\_\_\_\_  
Lot Location/Address \_\_\_\_\_

**THIS FORM IS TO BE CARRIED BY THE ITINERANT RETAILER WHILE CONDUCTING THEIR BUSINESS**

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