

**OFFICE USE ONLY**

LICENSE # \_\_\_\_\_

LICENSE CODE 25

ISSUE DATE \_\_\_\_\_

EXPIRES \_\_\_\_\_

\$1,000 BOND OBTAINED?

**YES****NO****DEPARTMENT OF PUBLIC SAFETY  
LICENSE SECTION****ITINERANT VENDORS  
LICENSE  
APPLICATION**☐**NEW**☐**RENEWAL****THE CITY OF  
COLUMBUS**  
MICHAEL B. COLEMAN, MAYORDEPARTMENT OF  
PUBLIC SAFETY**This application is to be completed by the owner, stockholder or partner of which to be licensed.****BUSINESS INFORMATION**

Business Name:

Federal ID:

**Circle One:**    Sole Proprietor    Corporation    Partnership    LLC

Address:

City:

State:

Zip Code:

Phone Number:

Cell Phone:

Business Email:

**OWNER INFORMATION**

Full Name:

**Date of birth:****SSN:**

Current address:

City:

State:

Zip Code:

Phone Number:

Cell Phone:

Email:

Ohio Driver's License Number:

Expiration Date:

Sex: **M**   **F**

Race:

Are you a U.S. citizen?    **YES**    **NO**

Place of Birth:

Are you a legal alien?    **YES**    **NO**

Alien Registration #

**If born outside of the U.S., proof of citizenship or alien registration card must be submitted.**Have you ever been convicted of a felony?    **YES**    **NO**List all felony convictions in the United States within the past seven (7) years. **If none, write "NONE".**

Are you on felony probation or parole? <b>YES</b> <b>NO</b>	If yes, date began:
Have you ever been required to register as a sexual offender? <b>YES</b> <b>NO</b>	If yes, date began:
Has any license issued to you or your company by the City of Columbus ever been revoked, suspended or refused within the past three (3) years?    YES    NO    If YES, please explain:	
<b>SALE INFORMATION</b>	
<b>Date of Sale:</b>	
<b>Sale Location:</b>	
<b>Items to be sold:</b>	
Approved By _____	
<b>ALL INFORMATION CONTAINED IN THIS APPLICATION IS SUBJECT TO DISCLOSURE AS A MATTER OF PUBLIC RECORD. ANY FALSE STATEMENT MADE OR GIVEN IN THIS APPLICATION SHALL RESULT IN DENIAL OR FUTURE REVOCATION OF THIS LICENSE, AS WELL AS CRIMINAL PROSECUTION UNDER CHAPTER 2321.13(A-3), (A-5) AND COLUMBUS CITY CODE 517.</b>	
<b>By signing this application, you agree to the following:</b> <ul style="list-style-type: none"> <li>Abide by all Columbus City Codes and Rules and Regulation governing Itinerant Vendors, including all applicable State of Ohio and Federal laws;</li> <li>Notify the License Section of any changes including business/owner contact information.</li> </ul>	
<b>State of Ohio, County of Franklin</b>  <div style="text-align: right; margin-right: 100px;">_____, being duly sworn, deposes and says he/she is</div> <div style="text-align: center;">(Print Applicant Name)</div> <p>the individual making the foregoing application; that he/she is knowledgeable with respect to that which is to be licensed; that the answers to the foregoing questions and other statements contained herein are true of his/her own knowledge and belief.</p> <div style="text-align: right; margin-right: 100px;">_____</div> <div style="text-align: center;">(Applicant Signature)</div> <p>Swore to before me and subscribed in my presence this _____ day of _____, 20_____</p> <div style="text-align: center; margin-top: 20px;">_____</div> <div style="text-align: center;">Notary or Agent of Director of Public Safety</div> <p style="text-align: center; margin-top: 20px;"><b>MUST BE SIGNED, DATED and NOTARIZED</b></p>	