



1100 McDuff Avenue / Post Office Box 425 Grandview, Texas 76050  
Office: (817) 866-2699 Fax: (817) 866-2961

**GENERAL PROVISIONS FOR THREE DAY SOLICITOR/VENDOR  
PERMIT IN THE CITY OF GRANDVIEW**

1. Applicant must complete the application for a Solicitor/Vendor permit. The City Manager (or his designee) shall review for approval.
2. The applicant must pay a non-refundable permit fee of \$20.00 for the three (3) day event.
3. Anyone failing to register for a solicitor/vendor permit may be fined up to \$500 per day with each day constituting a separate violation.
4. Solicitors/Vendors will obey all guidelines of proper salesmanship without any pressure or harassment displayed towards any person.
5. If complaints are received from individuals your permit is subject to cancellation at the discretion of the City Manager.
6. Vendors, unless non-profit, **MUST** have a TEXAS SALES TAX PERMIT.
7. Food vendors, except non-profit, **MUST** have a TEXAS SALES TAX PERMIT and a TEXAS DEPARTMENT OF HEALTH CERTIFICATE.
8. If a food vendor does not have a Texas Sales Tax Permit and a Texas Department of Health Certificate they **MUST** obtain one **prior** to participating in the event.
9. Anyone who does not have the Texas Sales Tax Permit and/or Texas Department of Health Certificate and attempts to sell during the event commits an offense.

I, \_\_\_\_\_ have read the provisions above and agree to abide by them during the event.

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date



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PERMIT # \_\_\_\_\_

**APPLICATION FOR THREE DAY SOLICITOR/VENDOR  
PERMIT FOR THE CITY OF GRANDVIEW**

Applicant's full name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Permanent physical address: \_\_\_\_\_

Driver license number: \_\_\_\_\_ State: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: (\_\_\_\_) \_\_\_\_\_

Occupation in which applicant desires to engage, for which he/she desires a permit (ie. vacuum sales, roof repair, seeking charitable donations, etc.):

\_\_\_\_\_

Full and complete description of good, wares, merchandise or other article, which applicant desires to sell or take orders for. (Give in detail the grade and character of the property to be sold)

\_\_\_\_\_

\_\_\_\_\_

Has applicant ever been convicted of a felony in any State or Federal Court?  YES  NO

If yes, give name of offense(s): \_\_\_\_\_

Court(s) or Jurisdiction(s): \_\_\_\_\_

Date(s) of conviction(s): \_\_\_\_\_

Time served?  YES  NO Where? \_\_\_\_\_

THE STATE OF TEXAS  
COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_ BEING FIRST DULY SWORN ON MY OATH, STATE THAT I PERSONALLY FILLED IN THE BLANKS IN THE ABOVE APPLICATIONS, ON MY OATH STATE THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT.

\_\_\_\_\_  
Applicant Signature

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public