



201 N. State Street Knob Noster, MO 65336

Phone: 660-653-2595 Fax: 660-563-5634

## PEDDLER'S LICENSE APPLICATION

### July 1, 2023 - June 30, 2024

Please provide the following information and submit this form with the required \$25.00 application fee and \$10.00 background check fee to the City of Knob Noster.

**APPLICANT NAME:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Applicant Address:** \_\_\_\_\_

**Driver's License:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

**EMPLOYER INFORMATION:**

**Employer Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Employer Address:** \_\_\_\_\_

**VEHICLE INFORMATION:**

**Color:** \_\_\_\_\_ **Model:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**OTHER SOLICITORS:**

**Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Driver's License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**For City use only:**

License #: \_\_\_\_\_ \*\* New / Renewal \*\* Date Pd: \_\_\_\_\_ \*\* Amount Pd: \_\_\_\_\_