



City Clerk's Office - Business Licensing Division
 204 N. Ridge Avenue - P.O. Box 229 - Tifton, GA 31793-0229
 (229) 382-6231 - Fax (229) 391-3990
 Website: <http://www.tifton.net> Email: cityclerk@tifton.net

TRANSIENT MERCHANT APPLICATION

THIS APPLICATION MUST (A) BE SIGNED BY THE APPLICANT IF AN INDIVIDUAL, OR BY THE MANAGING PARTNER OR DULY AUTHORIZED AGENT IF A PARTNERSHIP, OR BY THE PRESIDENT OR A DULY AUTHORIZED AGENT IF A CORPORATION OR OTHER ENTITY, (B) BE VERIFIED UPON OATH OR AFFIRMATION OR BY AFFIDAVIT, (C) CONTAIN THE FOLLOWING STATEMENTS AND INFORMATION AND SHALL OTHERWISE MEET ALL REQUIREMENTS:

A. INDIVIDUAL

NAME _____

BIRTHDATE _____ SOCIAL SECURITY NO. _____

CURRENT HOME MAILING ADDRESS

CURRENT HOME STREET ADDRESS

CURRENT LOCAL MAILING ADDRESS

CURRENT LOCAL STREET ADDRESS

HOME # _____ LOCAL # _____

Are you a citizen of the United State of America? Yes () No ()
 Are you a holder of a Georgia Sales Tax Number? Yes () No ()
 Georgia Sales Tax Number _____ Driver License Number _____

B. PARTNERSHIP

BUSINESS NAME _____

BUSINESS LOCATION _____

DATE OF FORMATION _____

TYPE OF PARTNERSHIP _____

FEDERAL TAX ID # _____

STATE TAX # _____

CURRENT BUSINESS ADDRESSES AND CURRENT RESIDENCE ADDRESSES OF ALL OFFICERS OR MANAGERS OF THE PARTNERSHIP. (IF ADDITIONAL SPACE IS NEEDED PLEASE CONTINUE ON LAST PAGE OF APPLICATION.)

Are you a citizen of the United State of America? Yes () No ()
Are you a holder of a Georgia Sales Tax Number? Yes () No ()
Georgia Sales Tax Number _____ Driver License Number _____

DESIGNATED AGENT (**MUST BE A RESIDENT OF GEORGIA**)

NAME _____

ADDRESS _____

MAILING ADDRESS _____

C. CORPORATION OR OTHER ENTITY

NAME OF CORPORATION _____

LOCATION OF INCORPORATION OR ENTITY _____

DATE OF INCORPORATION OR ENTITY _____

TYPE OF CORPORATION OR ENTITY _____

SALES TAX # _____

FEDERAL TAX I.D. # _____

NAME OF REGISTERED AGENT IN GEORGIA _____

ADDRESS OF REGISTERED AGENT IN GEORGIA _____

PRESIDENT OR CHIEF EXECUTIVE OFFICER

NAME _____

SOCIAL SECURITY # _____

CURRENT RESIDENCE ADDRESS _____

ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA? YES () NO ()

ARE YOU A HOLDER OF A GEORGIA SALES TAX NUMBER? YES () NO ()

GEORGIA SALES TAX NUMBER _____

DRIVER LICENSE NUMBER _____

DESIGNATED AGENT (**MUST BE A RESIDENT OF GEORGIA**)

NAME _____

ADDRESS _____

MAILING ADDRESS _____

D. COMPLETE THIS SECTION IF SOMEONE OTHER THAN THE APPLICANT IS TO ACTUALLY AND ACTIVELY BE IN CHARGE AND MANAGEMENT OF THE DAY TO DAY OPERATION OF THE BUSINESS IN WHICH THIS PERMIT IS UTILIZED. (THIS INDIVIDUAL MUST BE A CITIZEN OF THE UNITED STATES OF AMERICA.)

NAME OF MANAGER _____

SOCIAL SECURITY # _____

DATE OF BIRTH _____

ADDRESS _____

ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA? YES () NO ()

E. HAS APPLICANT OR ANY PERSON WITH RESPECT TO WHOM INFORMATION IS REQUIRED UNDER SUBSECTIONS (A) (B) OR (C) ABOVE BEEN DENIED ANY SIMILAR PERMIT BY ANY GOVERNMENTAL ENTITY OR HELD ANY SIMILAR PERMIT ISSUED BY ANY GOVERNMENTAL ENTITY WHICH HAS BEEN SUSPENDED OR REVOKED?

YES () NO () IF SO, GIVE THE CIRCUMSTANCES OF DENIAL OR SUSPENSION. (IN
DETAIL) _____

F. LOCATION OF ALL GOODS, MERCHANDISE AND OTHER TANGIBLE PROPERTY TO BE SOLD OR OFFERED FOR SALE _____

G. LOCATION WHERE PRODUCTS WERE MANUFACTURED _____

H. METHOD OF DELIVERY OF PRODUCTS OR SERVICE _____

I. LENGTH OF TIME BETWEEN TIME OF SALE AND DELIVERY _____

J. WILL WARRANTIES BE GIVEN OR OFFERED IN CONNECTION WITH SALE OF PRODUCT OR SERVICES; YES () NO () IF SO, GIVE THE NATURE, EXTENT AND CIRCUMSTANCES THEREOF:

K. WILL SALE OR ORDER BE ACCOMPANIED BY RECEIPT OF MONEY IN ADVANCE OF FINAL DELIVERY? YES () NO () IF SO, GIVE THE NATURE, EXTENT AND CIRCUMSTANCES THEREOF AS WELL AS A DESCRIPTION OF ALL FACTORS ENSURING OR TENDING TO ENSURE THAT FINAL DELIVERY OF PRODUCTS AND SERVICES WILL BE MADE IN ACCORDANCE WITH REPRESENTATIONS MADE PRIOR TO AND AT THE TIME OF SALE.

L. NATURE & LOCATION(S) OF THE BUSINESS OR ENTERPRISES WHICH THE PERMIT WILL BE UTILIZED.

M. LIST THE LAST TEN (10) COMMUNITIES WHERE YOU ENGAGED IN ACTIVITIES THE SAME AS OR SIMILAR TO THOSE FOR WHICH YOU ARE APPLYING TO OBTAIN A PERMIT AS WELL AS THE DATES OF SUCH ACTIVITY IN EACH COMMUNITY.

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

N. LIST NATURE, CHARACTER, MEDIA AND VOLUME OF ANY ADVERTISING WHICH WILL BE DONE AND GIVE SAMPLES OF SAME.

- O. THERE MUST BE SUBMITTED WITH THIS APPLICATION YOUR FINGERPRINTS ON TWO (2) FINGERPRINT CARDS WHICH ARE TO BE OBTAINED FROM AND WILL BE FURNISHED BY THE CITY OF TIFTON POLICE DEPARTMENT. CHECK HERE TO INDICATE THAT SUCH FINGERPRINT CARDS ARE ATTACHED HERETO. ()
- P. THERE MUST BE SUBMITTED WITH THIS APPLICATION A VALID DRIVER'S LICENSE OR SOME OTHER FORM OF PERMANENT IDENTIFICATION WHICH CONTAINS A PICTURE OF THE APPLICANT AS WELL AS THE GEORGIA SALES TAX #

NOTE: BEFORE SIGNING THIS APPLICATION, CHECK ALL ANSWERS, STATEMENTS AND RESPONSES TO SEE THAT YOU HAVE ANSWERED ALL QUESTIONS FULLY AND CORRECTLY. THIS STATEMENT IS TO BE EXECUTED UNDER OATH AND IS SUBJECT TO THE PENALTIES OF FALSE SWEARING, AND INCLUDES ALL ATTACHED SHEETS SUBMITTED HEREWITH.

VERIFICATION

GEORGIA, _____ COUNTY.

I, _____, DO SOLEMNLY SWEAR, SUBJECT TO THE PENALTIES OF FALSE SWEARING, THAT I HAVE BEEN FURNISHED A COPY OF CHAPTER 21.5.870 OF THE CITY OF TIFTON ORDINANCE, AND ACKNOWLEDGE THAT I FULLY UNDERSTAND THE REGULATIONS AS PROVIDED FOR IN THE ORDINANCE AND THAT THE ANSWERS, STATEMENTS AND RESPONSES MADE BY ME IN THE FOREGOING APPLICATION ARE TRUE AND CORRECT. I FURTHER HEREBY CERTIFY THAT I AM FULLY QUALIFIED IN ALL RESPECTS UNDER SECTION 7-21A AND SECTION 8-21A OF THE ORDINANCES FOR THE CITY OF TIFTON TO BE THE HOLDER OF A PERMIT ISSUED BY THE CITY OF TIFTON. FURTHERMORE, I CERTIFY THAT THE LOCATION FOR WHICH THIS PERMIT IS SOUGHT MEETS ALL CONDITIONS, QUALIFICATIONS AND CRITERIA ESTABLISHED BY THE ORDINANCES FOR THE CITY OF TIFTON.

SIGNATURE

I HEREBY CERTIFY THAT

(the above-named person)

IS PERSONALLY KNOWN TO ME, THAT HE/SHE SIGNED HIS/HER NAME TO THE FOREGOING STATEMENT STATING TO ME THAT HE/SHE KNEW AND UNDERSTOOD ALL ANSWERS, STATEMENTS AND RESPONSES MADE THEREIN, AND, UNDER OATH ACTUALLY ADMINISTERED BY ME, HAS SWORN THAT SAID ANSWERS, STATEMENTS AND REPONSES ARE TRUE.

NOTARY PUBLIC

NOTARY EXPIRATION DATE

FOR CITY USE ONLY

THE TYPE OF RETAIL THE PERMIT IS REQUESTED FOR: _____

DATE (S) PERMIT IS GRANTED FOR _____

APPLICANT AND ALL OTHER PERSONS WITH RESPECT TO WHOM INFORMATION IS REQUIRED UNDER SUBSECTIONS (A), (B) OR (C) ABOVE ARE QUALIFIED IN ALL RESPECTS, UNDER THIS ARTICLE AND UNDER SUCH OTHER ORDINANCES OF THE CITY AS ARE APPLICABLE TO THE PERMIT TO BE THE HOLDER OF THE PERMIT APPLIED FOR. YES () NO ()

BONDS

EACH APPLICANT FOR A PERMIT WHO IS NOT A RESIDENT OF THE CITY OR WHO IS A RESIDENT OF THE CITY AND REPRESENTS A PERSON OR ENTITY WHOSE PRINCIPAL PLACE OF BUSINESS LOCATED OUTSIDE THE STATE OF GEORGIA, SHALL FILE WITH THE RESPONSIBLE OFFICIAL A SURETY BOND RUNNING TO THE CITY IN THE AMOUNT OF TEN THOUSAND DOLLARS (\$10,000.00)

IF THE APPLICANT IS AN AGENT OR EMPLOYEE OF A CORPORATION AUTHORIZED TO DO BUSINESS IN THE STATE OF GEORGIA OR REGISTERED UNDER THE FICTITIOUS NAME ACT OF THE STATE OF GEORGIA, THE CORPORATION OR FICTITIOUS NAME BUSINESS MAY FURNISH ONE (1) BOND TO THE CITY IN THE AMOUNT OF TEN THOUSAND DOLLARS (\$10,000.00) FOR ANY AND ALL OF ITS AGENTS AND EMPLOYEES.

THE BOND NEEDS TO BE FILED WITH THE RESPONSIBLE OFFICIAL INSTRUMENT IN WRITING, SIGNED BY THE APPLICANT UNDER OATH, NOMINATING AND APPOINTING THE CITY CLERK OF THE CITY AS HIS, HER OR ITS TRUE AND LAWFUL AGENT FOR SERVICE OF PROCESS FOR AN AUTHORITY BEING DELEGATED TO THE CITY CLERK TO ACKNOWLEDGE THE SERVICE OF PROCESS FOR AND ON THE BEHALF OF THE APPLICANT WITH SERVICES OF SUMMONS IN ANY ACTION BROUGHT UPON THE APPLICANT'S BOND TO BE DEEMED MADE WHEN SERVED ON THE CITY CLERK OF THE CITY.

RESTRICTIONS

THE RESTRICTIONS FOR THE TRANSIENT MERCHANT ARE AS FOLLOWS:

NO PERSON WILL BE ALLOWED TO ENGAGE IN ANY ACTIVITIES PERMITTED BETWEEN 9:00 P.M. PREVAILING TIME AND 8:00 A.M. PREVAILING TIME THE FOLLOWING DAY.

NO PERSON OR ENTITY WHO OR WHICH IS ENGAGED IN ANY ACTIVITIES PERMITTED PURSUANT TO A PERMIT ISSUED PURSUANT TO THIS DIVISION SHALL REPRESENT OR ADVERTISE ANY CONDITION, MATTER OR CIRCUMSTANCE WHICH IS AT VARIANCE WITH THE SAID PERMIT OR ANY OF THE REPRESENTATIONS OR MATTERS SET FORTH IN THE APPLICATION FOR THE PERMIT.