



Must make an APPOINTMENT for ID Card 972-237-8790

Date of Application _____ PERMIT # _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE # _____ CELL# _____

DL or ID _____ State _____ HEIGHT: _____ WEIGHT: _____ HAIR: _____

EYE COLOR: _____ DATE of BIRTH: _____

Name of Business: _____ Business Phone: _____

Business Address: _____ City: _____

State: _____ Zip Code: _____ Type of Business: _____

List number of Limited Sales Tax Permit issued by the State of Texas Comptroller's Office: Copy attached

Description of Vehicle to be used: _____
License Plate # _____ State registered _____ Expiration of License Plate _____

Color of Vehicle: _____ Make: _____ Model: _____

Year of Vehicle: _____ Flyer Delivery _____ Door to Door _____
Check one

***I have completed this application and read all the information contained in the application .
I understand that any false information given will result in the application for a permit being
Denied.***

Signature of Applicant x _____

THIS PORTION MUST BE FILLED OUT

RELEASE FOR ITINERANT VENDOR/ SOLICITOR PERMIT

CRIMINAL RECORDS CHECK:

I, the undersigned, do hereby request and specifically authorize you to release to the Grand Prairie Police Department, any and all information you have regarding any arrests and / or convictions. I am fully aware of the fact that this information will be used in conducting a background investigation and local wanted and records check pursuant to issuing an itinerant vendor/solicitor permit. I hereby release the City of Grand Prairie, the Grand Prairie Police Department, it's agents and employees from any and all liability and / or damage which may result from the furnishing of any local records check information.

Date: _____ Signature: _____

Address: _____ City and State, Zip _____

PLEASE PRINT FULL NAME _____ DATE OF BIRTH _____