

**APPLICATION FOR VENDOR LICENSE [HMC 5.05]**

**DATE OF APPLICATION:** \_\_\_\_\_

**APPLICANT FULL NAME:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Drivers License:** \_\_\_\_\_ **State:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**NAME OF BUSINESS:** \_\_\_\_\_

**TYPE OF BUSINESS:** \_\_\_\_\_

**BUSINESS ADDRESS** [if different from above]: \_\_\_\_\_

**VEHICLE DESCRIPTION**

**MAKE:** \_\_\_\_\_ **YR:** \_\_\_\_\_ **LICENSE PLATE:** \_\_\_\_\_ **COLOR:** \_\_\_\_\_

***NOTE:** Anyone applying to solicit door-to-door is subject to a background investigation by the City of Hubbard. I consent to that investigation.*

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

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**ADDITIONAL NAMES OF PERSONS WORKING WITH BUSINESS:**

[Additional names may be listed on the back of this form]

**NAME:**

**ADDRESS:**

**DOB:**

**DRIVERS LICENSE #:**

**DL STATE:**

**VEHICLE MAKE/MODEL/YR:**

**VEHICLE PLATE #:**

**VEHICLE COLOR:**

**NAME:**

**ADDRESS:**

**DOB:**

**DRIVERS LICENSE #:**

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