

| Renewal |
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## PEDDLER, SOLICITOR OR ITINERANT **MERCHANT** LICENSE APPLICATION

**Municipal Code, Chapter 33** 

DO NOT MAIL THIS APPLICATION. ALL APPLICANTS MUST APPLY IN PERSON

# Submit application to:

City of DeKalb Finance Division 164 E. Lincoln Hwy DeKalb, Illinois 60115 815-748-2000

### FEES ARE NOT REFUNDABLE OR PRORATED

## **Peddler or Solicitor**

-Application Fee: \$25.00 each -Background Check: \$50.00 each -Daily Fee: \$25.00 per day per person

-License Period: Limited to 30 days

### **Itinerant Merchant**

-Application Fee: \$25.00 each -Background Check: \$50.00 each -Daily Fee: \$25.00 per day

-License Period: Limited to 180 days

## Food Vendor or Food & **Beverage Vehicle**

-Application Fee: \$25.00

-Operating Fee: \$50.00 annually (April 1- March 31)

# The undersigned hereby makes application for (choose one):

| □ <b>P</b> | <b>Peddler:</b> A person engaged in business who engages in the sale of any commercial item on any street, sidewalk, park or public place or who travels from place to place in the City, or who engages in the sale and delivery from any vehicle or pushcart going from place |  |   |  |  |
|------------|---|--|---|--|--|
| to         | place in the City and who carries such  | commercial with him/her for delivery at the time of  | sale.   |  |  |
|            |   | street, sidewalk, park or public place, who  |   |  |  |
| р          | eriodicals, publications or commercial it   | commercial item, who solicits subscriptions for tems for immediate or future delivery, or who offer  |   |  |  |
|            | ervices or any commercial item.   | ed in hypinage in the City offering for cale any com   | maraial itam tuba intende to continue auch    |  |  |
| bı         | usiness in the City for not more than one   | ed in business in the City offering for sale any com-<br>hundred and eighty (180) days and who, for such pi<br>the display of such commercial item, or in connection | urpose, leases or occupies all or part of any |  |  |
|            |   | <b>cle:</b> A vehicle from which the retail sale of food   |   |  |  |
| C          | onducted (including ice cream vehicles).  |  |   |  |  |
| Pe         | riod beginning on   | and ending   | as indicated hereafter                        |  |  |
| Bu         | siness Name:  |  |   |  |  |
|            |   |  |   |  |  |
| Tel        | lephone No.:  |  |   |  |  |
| Na         | me of Applicant:  |  |   |  |  |
| Но         | me Address:   |  |   |  |  |
| Em         | nail Address:   |  |   |  |  |
| Dri        | ver's License No.:  | ST PRESENT A VALID DRIVER'S LICENSE OR STATE ID UPO  | ON CURMICSION OF THE APPLICATION              |  |  |
| M          |   | Model:   |   |  |  |
|            |   | Wodel.   |   |  |  |
|            |   | d:   |   |  |  |
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|            |   |  |   |  |  |
| Lis        | st the two most current cities in Illino  | is that you conducted this type of business and  | d the dates business was conducted:           |  |  |
| 1.         |   |  |   |  |  |
| 2.         |   |  |   |  |  |

### Required Documents (application will not be accepted without the following documents):

#### FOR SOLICITORS:

- 1. A copy of the business' Illinois Business Authorization / Retailer's Occupation Tax Certificate (blue card from the department that carries the business name and tax number).
- 2. A complete, fully executed, and notarized Background Check form.

#### FOR FOOD VENDORS

- 1. A copy of the business' Illinois Business Authorization / Retailer's Occupation Tax Certificate (blue card from the department that carries the business name and tax number).
- 2. A copy of the DeKalb County Food Service/Establishment License/Permit along with a copy of any required inspection, permit or insurance.
- 3. Certificate of Insurance: Every food or beverage vending vehicle operated within the City on any public roadway shall be covered by a policy of automotive liability insurance and a policy of comprehensive general liability insurance issued by a solvent and responsible insurance company authorized to do business in Illinois. Each such policy shall carry minimum limits of coverage of \$1,000,000.00 per occurrence. Each vendor shall provide the City with a certificate of insurance naming the City of DeKalb as an additional primary insured without right of subrogation.
- 4. A letter of permission from the property owner where the Food Vending Vehicle will be located (if applicable).

I hereby state that I have not been convicted in the past four years of a felony, any sex offense as defined in Chapter 720, Act 5, Article 11 of the Illinois Compiled Statutes, or any of the following crimes as defined in said Chapter 720: assault, deception, criminal damage to property, criminal possession of any dangerous or narcotic drug, or disorderly conduct. I certify the above to be true and correct to the best of my knowledge and that I shall not violate any of the laws of the State of Illinois or the ordinances of the City of DeKalb. I further state that I have read and understand the regulations regarding Sales Tax in the City of DeKalb.

| Signature of Applicant: | Date | <b>!</b> |
|-------------------------|------|----------|
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#### IMPORTANT INFORMATION

#### Applicants Must Register with the Illinois Department of Revenue for Payment of Sales Tax.

For sales tax questions or registration forms, call the Illinois Department of Revenue at:

Central Registration: (217) 785-3707; or

Rockford Office: (815) 987-5210

To register online: www.tax.illinois.gov [Click on "e-services" under Businesses (green box)]

#### Sales Tax for the City of DeKalb is 8.0%

This is the amount you will collect and report to the State of Illinois. Compliance is required and will be verified. Failure to comply with these rules and regulations will result in termination of your license and possible legal action.

<u>Food Vendors</u> must also register with the City of DeKalb Finance Department at 164 E. Lincoln Highway, and are required to **collect and pay an additional 2% of sales tax directly to the City** as required in Municipal Code Chapter 60: <a href="http://www.cityofdekalb.com/CityClerk/Municipal Code.htm">http://www.cityofdekalb.com/CityClerk/Municipal Code.htm</a>. Contact the Finance Department at (815) 748-2000 to register.