



City of Belton, Missouri
 506 Main Street – Belton, MO 64012
 P 816.331.4331 • F 816.322.4620

Fees	License Year 2020-21
<ul style="list-style-type: none"> Permit fee \$15 	
License fees are not prorated. City licenses expire June 30 of each year.	

Peddler Permit Application (please type or print)

*Reminder – A business may NOT operate until a business license is approved.
 Please allow 5 days for license processing.*

This application is intended for use by a **door-to-door peddler to receive a Belton city permit**. A permit for each door-to-door peddler is required in addition to the business receiving a business license. For ice cream peddlers, please see separate application.

Peddler Information

Peddler Name _____ Peddler Phone Number _____

Full Street Address (No PO Boxes) _____ Peddler's SS# _____
City/St/Zip

Full Mailing Address (if different) _____ Date of Birth _____
City/St/Zip (month/day/year)

Height _____ ft/in Weight _____ lbs Hair Color _____ Eye Color _____ Sex _____

Email _____ Description of Type of Business Door-to-Door Peddler

Yes / No Are you a U.S. citizen? If no, please provide employment authorization document _____

Yes / No Have you ever been convicted (found guilty) in any court in the U.S. for any offences for which you served time, received a sentence (even suspended), were placed on probation, or paid a fine? This includes all traffic tickets and arrests. This does not include minor traffic violations. If yes, please provide approximate date, charge, and location/jurisdiction of each.

Please provide a description of the nature of the business and/or goods to be sold.

Description of Vehicle to be used _____ Vehicle license plate# and State _____
Make / Model / Year / Color

- Attach a valid U.S. driver's license.
- If the applicant lives inside Belton city limits, attach the previous year's personal property tax receipt OR a letter of non-assessment from Cass County.
- Attach a 2" x 2" color photograph showing head and shoulders of applicant. (See page 2 of application)
- Attach the applicant's Missouri Highway Patrol background check (basic, no fingerprints) dated within the past 90 days.

Please provide three (3) personal references

1. _____
(name/address/phone number/email, if available)
2. _____
(name/address/phone number/email, if available)
3. _____
(name/address/phone number/email, if available)

Office Use Only Approved by _____ Date _____	Cigarette License # BL / BR _____
Business License # BL / BR _____ Fee \$ _____ / Exempt TIF? _____	Fee \$ _____ 5/2020

A current/active Belton business license must be on file for your employer before a peddler permit can be issued. Please provide your employer's information so we can verify their license status.

Business Information

Business Name _____ DBA Name (if different) _____
Address (No PO Boxes) _____ Business
Phone Number _____
City/St/Zip _____
Mailing Address (if different) _____ Owner's Name _____
City/St/Zip _____

Additional Information for ALL APPLICANTS

Yes / No Do you run a business in another location? If yes, please provide location information.

Yes / No Have you ever had a business license revoked, suspended, or denied? If yes, please explain.

Yes / No Are you currently under investigation or have outstanding warrants? If yes, please explain.

By signing my name below, I hereby certify I am a legal U.S. citizen or I am legally authorized to work in the U.S. I certify the business described in this application does not employ any illegal aliens. I certify the business or occupation I intend to pursue under the authority of the license for which I am applying does not violate or otherwise conflict with existing laws of the State of Missouri or ordinances of the City of Belton. I hereby state the information contained herein is true, correct, and complete to the best of my knowledge. I authorize the city, its agents, and employees to seek information and conduct an investigation into the truth of the statements set forth in the application. I also acknowledge that this is only an application and is not approval for me to operate a business within the City of Belton, Missouri.

Please note: this application must be fully completed & legible before it will be processed.

Signature of Applicant

Printed Name

Date

Attach Color Photo Here

Notary

I, (applicant-print name) _____, who subscribed to the foregoing document, do hereby make solemn oath that the statements contained therein and attached are true and complete to the best of my knowledge, information, and belief.

Signature of Applicant

Date

State of _____

County of _____

Subscribed and sworn to before me this ____ day of _____ in the year _____.

My commission expires _____

Notary Public

(seal)