

City of Poplarville

TRANSIENT VENDOR LICENSE APPLICATION

NEW \$ 250.00

RENEWAL \$ 25.00

1. Applicant's Name _____

2. Applicant's Permanent Address _____

3. Telephone Number _____

4. SSN or Federal ID# _____

5. State of Mississippi Sales Tax Number _____

6. List Other Counties And Municipalities Where Licensed To Operate Transient Business & List Permit or License Numbers

7. Kind of Product or Service _____

8. Location Where Business Will Be Conducted _____

9. Length of Time Business Will Be Conducted _____

10. Name of Registered Agent _____

Address of Agent _____

Telephone Number of Agent _____

(Agent must be a resident of county or municipality from which license is obtained. Signed authorization from agent must be attached.)

11. If Applicant Is Association Or Corporation, Complete The Following:

A. Name & Address of Members of Association Or Officers Of The Corporation

NAME	ADDRESS	TITLE	SSN
_____	_____	_____	_____
_____	_____	_____	_____

B. Corporation Organized Under The Laws Of The State Of _____

If Foreign Corporation, Date Authorized To Conduct Business In Mississippi _____

A vendor must secure a license before beginning business for each county and each municipality in which business will be conducted. License is valid for ninety days from date issued and is not transferable. Renewal fee is filed before license expires. The transient vendor license number, state sales tax number, and a statement that vendor is required to give purchasers a receipt which includes sales tax, must be displayed in a prominent place. This posting is required to be in bold, legible letters not less than one inch in height. A cash bond or surety bond made in favor of the State of Mississippi in the amount of the lesser, \$2,000.00 or 5% of wholesale value of inventory, must accompany this application. This bond must not expire for one full year after business is conducted. Also, a good and sufficient penal bond in an amount up to \$1,000.00 must be attached to this application. Vendor must maintain a running total of all sales and pay all applicable sales taxes and any other taxes that may apply. Violators of this act or any of its provisions can be convicted of a misdemeanor, fined \$500.00 and/or imprisoned for up to six months.

I DECLARE UNDER THE PENALTIES OF PERJURY THAT THIS APPLICATION AND ALL ITS SUPPORTING DOCUMENTATION IS, TO MY KNOWLEDGE, TRUE AND CORRECT.

signature of applicant

date

We are an Equal Opportunity Service Provider

OFFICE USE:

LICENSE NUMBER _____

DATE ISSUED _____

RECEIPT # _____