



The City of Baker City Application for City License

Investigation Fee — City & County: \$10.00

Date Paid: _____

Investigation Fee — Others: \$50.00

Approved: Y or N by: _____

Type of License

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> Transient Merchant | <input type="checkbox"/> Bazaar | <input type="checkbox"/> Circus |
| <input type="checkbox"/> Trade Show | <input type="checkbox"/> Pawnbroker | <input type="checkbox"/> Carnival |
| <input type="checkbox"/> Peddler | <input type="checkbox"/> Auctioneer | <input type="checkbox"/> Mobile Vendor |

Applicant Information (Must be clearly legible)

Business/Organization Name:		
Business Address:		
Applicant/Owner's Name:		
Applicant/Owner's Home Address:		
Phone:		
SS#	Driver's License #	State:
DOB:	Height/Weight:	Eyes/Hair:

Criminal History

List ALL criminal arrests & convictions: (if additional room is needed, attach separate page)

Charge	Where	When
1.		
2.		

Activity Description

Description of Goods/Services Offered: *If food/beverage, attach copy of State Health Division License	
Location of Business Operation in Baker City:	
Length of time requested to do business in Baker City:	

Business Vehicle Description

Make:	Model:
Color:	License Plate:
State:	

References

Name at least two Baker County, Oregon property owners who can certify to the applicant's character and business responsibility; or in lieu of those names the applicant can provide any other available and verifiable evidence as to their character and business responsibility.

Name: _____ Address/Phone: _____

Name: _____ Address/Phone: _____

Authorization

The answers made to each and all of the above questions are true and complete to the best of my knowledge and belief. I am aware that any misstatements of material fact may cause rejection of application, and I may be disqualified from receiving any license from Baker City. I also certify that I have read and understand the attached rules and regulations, which are related to my license and activity.

SIGNATURE: _____ DATE: _____