

APPLICATION FOR TRANSIENT VENDOR LICENSE

Marshall County Clerk's Office – 1107 Courthouse Annex, Lewisburg, TN 37091 (931) 359-1072

(THIS APPLICATION MUST BE ACCOMPAINED BYA \$55.00 FEE)

Name of Owner(s): _____

Name of Business: _____

Type of Sales: _____

If Corporation, Name of President: _____

Mailing address: _____

Physical address: _____

Phone Numbers: _____

Business

Cellular

Sales Tax ID # (if applicable) _____

Location of Sale: _____

Date opening: _____ **Date closing:** _____

(Permit is only valid for 14 days)

Signature of Applicant / Title

CLERK'S USE ONLY

TRANSIENT VENDOR'S LICENSE # _____

DATE ISSUED: _____ **EXPIRATION DATE:** _____