



City of Ringgold

150 Tennessee Street
Ringgold, GA 30736

Office (706) 935-3061
Fax (706) 965-7446

PEDDLERS AND SOLICITORS PERMIT APPLICATION

NAME (full): _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
PHONE NUMBER: _____
NAME OF EMPLOYER: _____ PRODUCTS SOLD: _____
MANUFACTURER OF PRODUCTS: _____
ORGANIZATION REPRESENTED: _____
TIME OF OPERATION IN CITY (DATE & TIMES): _____
PROPOSED METHOD OF OPERATION: _____
SALES TAX NUMBER & CERTIFICATE: _____
PERMIT EXPIRATION DATE: _____
(No longer than six months)

OATH

OATH: I do solemnly swear, subject to criminal penalties for false swearing, that the statements and answers made to the questions in this application are true and complete, and no false or fraudulent statement or answer is made herein to procure granting of a permit, that any permit issued pursuant to this application conditioned upon a fraudulent statement or answer herein shall constitute cause for the suspension or revocation of any permit issued pursuant to this application.

DATE ____/____/20____ SIGNATURE: _____

TO BE FILED AT RINGGOLD CITY HALL, 150 TENNESSEE STREET, ALONG WITH A PAYMENT OF A \$50.00 NON-REFUNDABLE PROCESSING FEE.

\$50.00 fee paid on _____, 20____ Cash Ck # _____ Credit Card

FOR OFFICE USE ONLY:

Background check complete _____ Verified valid license _____

Verified Valid Sales Tax Number _____

Approved: _____ Denied: _____