



Town of Ingersoll
Transient Trader Class "A"
Licence Application

Department of Clerk/Administration

Name of Applicant: _____
Business Name: _____
Address: _____
Town/City: _____
Postal Code: _____
Phone Number: _____
Date/Times of Event(s): _____

Leave Blank if same as above:

Home Address: _____
Home Phone Number: _____
Town/City: _____
Postal Code: _____
Home Phone Number: _____
Date of Birth: _____

List of merchandise to be sold:

Clearly state location from which merchandise is being sold:

Fees: Resident \$50.00 Non-Resident \$200.00

Applicant Signature: _____ Date: _____

For Internal Use

Approved	Yes	No	Approved	Yes	No
----------	-----	----	----------	-----	----

Permit No. Issued:

Town clerk/Deputy Admin Signature

Police Signature

Date

Date