



CITY OF CHELAN
Peddlers/Hawkers License Application

Name of Business _____

Name of Owner _____

Name of Applicant _____

Applicant Mailing Address _____

City _____ State ____ Zip _____ Daytime Phone () _____

Email Address _____

State Tax No. _____

Date(s) of Operation Requested _____ through _____ Number of Days _____

The application must be reviewed by the City Administrator or his/her designee before being approved. The application must be in compliance with the following as outlined in Chelan Municipal Code 5.20.030 through 5.20.050 and Chelan Municipal Code 17.50.010 (G) which states that you must have a commercial lease or concessions license as authorized by the public entity that is the owner of the land.

PEDDLER/HAWKER LICENSEES ARE NOT ALLOWED TO OPERATE IN ANY CITY PARKS.

1. What goods, wares, services, merchandise or articles will be sold?

2. How do you plan to conduct business?

3. Describe in some detail (area (on attached map), times of operation, number of employees, etc.) **PEDDLER/HAWKER LICENSEES ARE NOT ALLOWED TO OPERATE IN ANY CITY PARKS.**

I certify under penalty of perjury that the information above is correct, to my best knowledge and belief.

Applicant's Signature

Date

Fees: Peddlers/Hawkers license - \$10.00 per day up to \$100.00 for a 120 day period.

Payment is to be made upon approval of application and prior to issuance of a Peddlers/Hawkers license.
Do not send payment with this application.

Please return this application to:

City Administrator
City of Chelan
P.O. Box 1669
Chelan, WA 98816

DO NOT WRITE BELOW THIS LINE

The City Administrator or his/her designee shall review the application and prepare a written report addressing, but not limited to, issues of public safety, pedestrian traffic, vehicular traffic, public disturbance and noise. Ten days are allowed but not required to complete this.

Date application received: _____

Report:

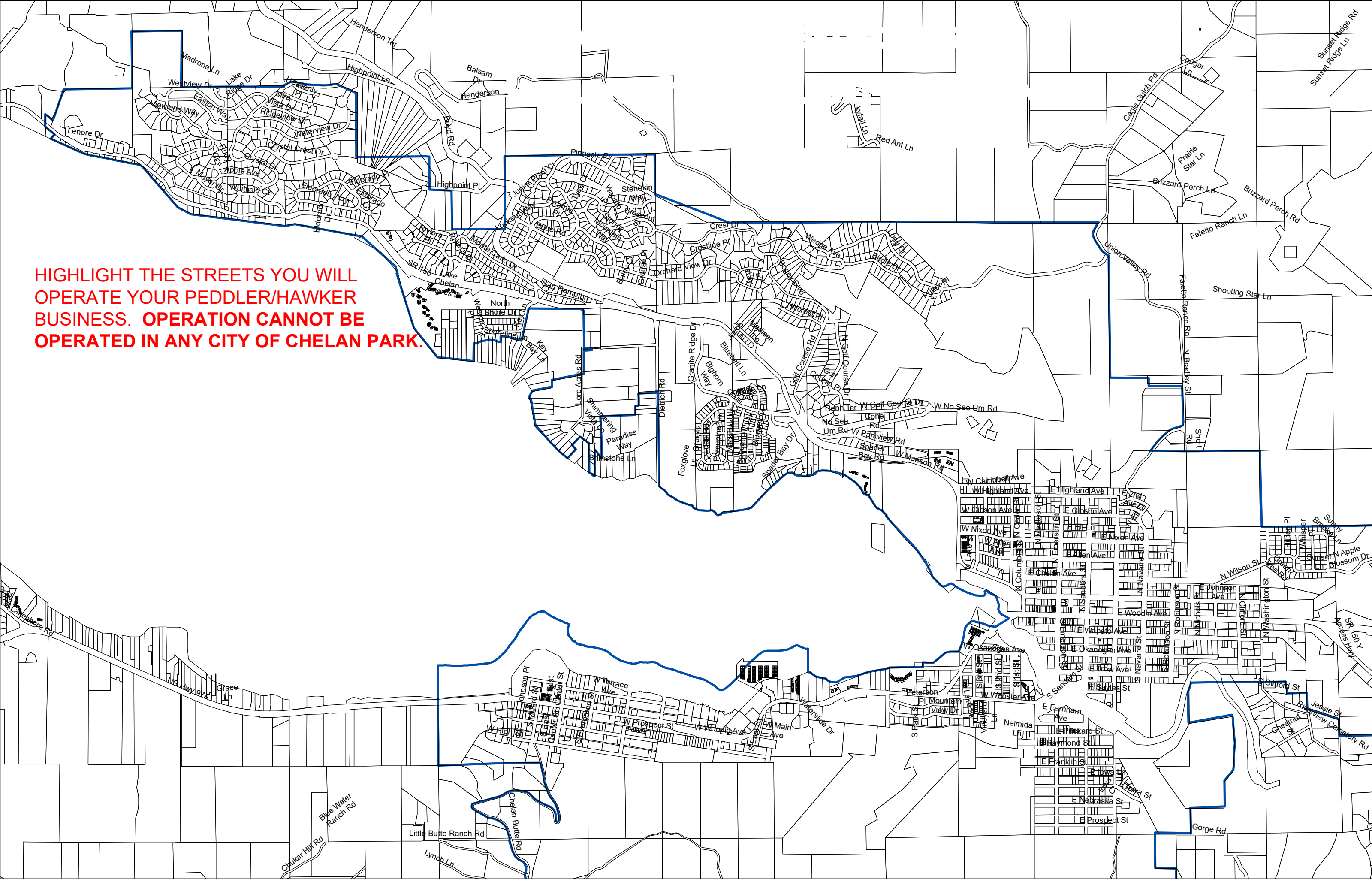
Based on these findings, the applicant is _____ is not _____ granted the permit granted on the condition that:

Date City Administrator or Designee

Date Received _____ License Fee _____

By _____ Receipt No. _____

Effective Date _____ Expires _____



HIGHLIGHT THE STREETS YOU WILL OPERATE YOUR PEDDLER/HAWKER BUSINESS. OPERATION CANNOT BE OPERATED IN ANY CITY OF CHELAN PARK.