City of Carpinteria

5775 Carpinteria Avenue, Carpinteria, CA 93013-2697 805-684-5405 Ph www.carpinteriaca.gov 805-684-5304 Fax



Carpinteria Municipal Code - Peddlers Chapter 5.60					
Date		-			
Name					
(List all names by which you ha Present Mailing address					
Tresent Manning address	Number/street	City	State	Zip	
Phone	Cell Phone		Fax		
Drivers License	Expires		Birth date		
Business Name					
Business Address					
Business Mailing Addre	SSS Number/street	City	State	Zip	
Phone	Cell Phone		Fax	1	
Email					
County Environmental Health Permit No:			Exp. Date:		
License of approved vehicle:]	Reg. Expiration:		
Insurance Co: Phone No:					
Insurance Requirement Proof of insurance must insurances are required	t be verified prior to			llowing	
 General Liability (minimum limit of \$300,000) including vendor's and/or product liability: Name of insurance company: 					

PEDDLER PERMIT APPLICATION

Phone: _____ Fax: _____ Peddler Permit Application

Date issued:	Exp. Date:	
 Workers Compensation and Employer Name of insurance company: _ 	liability (\$100,000):	
Date issued:		
3. You must submit two current passport-s	sized photographs for the identification card.	
to CMC Section 5.60.060 Investigation, an result of such investigation false statements involving violence, larceny or sale of drugs	In must be submitted to the Department of Justice and approved by the City Manager or his designee. Is are made on this application, or convictions of or s within the previous three years, or involving a c s of the application date, the City Manager or des Peddler's Permit shall be issued.	If as a crimes crime of a
Have you ever been convicted of a felony i	involving violence, larceny or drugs?	🗌 No
If yes, list all convictions and provide the f	following information:	
Date of conviction(s):	County/State Conviction:	
Circumstances of conviction(s) and codes	violated:	
Date of conviction(s): Circumstances of conviction(s) and codes	County/State Conviction:	
5. Have you ever had your driver's license	e suspended or revoked?	🗌 No
If yes, provide the following information:		
Date of Suspension/Revocation:	County/State of Suspension/Revocation	
Circumstances of Suspension/Revovation:		
Location of peddling sites requested		_

Peddler	Permit	Applica	tion
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Days of week that you will peddle_____

By my signature below, I authorize the City and it's agents to seek information and conduct and investigation into the truth of the statements set forth in the application. Any misrepresentation of fact, or information withheld, are grounds for denial or revocation of an approved peddling permit.

Signature of Applicant	Date	
The non-refundable application fee of \$ 570 must be so must be returned by the Department of Justice prior to Compliance Supervisor at (805) 755-4418 to schedule determine if it is complete for submittal.	approval of the license. Please call the Code	
Check No Paid	Received by Date	
APPROVED DENIED		
Approved location permit issued?	🗌 No	
Signature of City Manager	Date	
Peddling Permit Application Fee Paid Yes Permit valid for calendar year through	🗌 No	

Signature of the Peddling Permit Conditions is required prior to the issuance of the permit. A business license is required to be kept current during the life of the permit. There is a \$10 per day peddling fee which is required to be paid quarterly.