



VENDOR APPLICATION
CITY OF BATTLE CREEK CLERK'S OFFICE

Date: _____

Name of Applicant _____ Permanent Address _____ City _____ State _____ Zip _____

Local Address _____ Home Phone No. _____ Work Phone No. _____

Date of Birth _____ Color of Eyes _____ Weight _____ Height _____ Race _____ Sex _____ Color of Hair _____

1. Name two reliable property owners of Calhoun County who will certify as to applicant's good character and business responsibility:

Name _____ Street _____ City _____ State _____ Zip _____ Phone No. _____

Name _____ Street _____ City _____ State _____ Zip _____ Phone No. _____

2. Has the applicant ever been convicted of any crime, misdemeanor or violation of any Municipal Ordinances? Yes No

2a. If yes, explain fully the nature of the offense and punishment/penalty assessed:

3. State place or places where applicant has conducted business within the past six months, stating the nature thereof:

4. Briefly describe the nature of the business and goods to be sold: _____

5. Are the goods to be sold/produced by the applicant? _____
If yes, state where goods are produced: _____

6. From what address/location do you expect to do business: _____

7. Quality of goods to be sold: _____ Invoice Value: _____

8. If goods are not delivered at time of sale, explain proposed method of delivery: _____
