## **Village of Oxford Transient Merchant Application**

Applicant Name: _					
	Last			Middle	
	ımber:				
Temporary Address	and Telephone Number,	, if applicable			
Date of Birth:					
Height:	Weight:	Hair Color:	Eye	Color:	
Driver's License #: _		State	e Issued:		
	Employer or Supplier,	, If Any (Attached Co	py of Busines	ss License)	
Name:					
Address:					
Telephone Number:					
	*******				
Nature of Business:					
	Make:				
Professional Referen	aces (Previous Business	Contacts/Municipality	y Contacts):		
1	2	3			
_()	_()	_(_	_)		
describe the nature o	convicted of a crime or of the offense and the pla	ce of conviction:			
Do you agree to appoaction brought again	oint the Village Clerk-Test you arising out of any vities, in the event that y	reasurer as your agent sale or service perfor	t to accept ser rmed by you,	vice of process as applicant, in	in any civil connection with
Applicant Signature:		Date Applica	tion Filed		
Application Fee Due:		Application F	ee Paid:		
Village Clark	c-Treasurer / Date	Police Approx	val / Data (Da	wiew mey teke	 un to 30 days)