PEDDLER'S LICENSE APPLICATION

Dat	Date/(month, day, year) Fee \$100.	.00	
1.	 New Business □ Renewal □ Provide prior year's licer 	nse number	
2.	2. Federal Employer ID Number:		
3.	3. LA Sales Tax Number:		
4.	4. Local Sales Tax Number:		
5.	5. a. Taxpayer Name		
	b. Telephone Number		
	c. Trade Name		
	d. Mailing Address:		
	e. Physical Address:		
6.	6. Type of Business ☐ Individual ☐ Partnership ☐ Corporation ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		
7.	7. Provide information on owner(s) below. If corporation or partnership, provide Information for officers or partners. For corporation, provide state of incorporation.		
	Name: Title		
	Social Security Number Phone No		
	Email:		
	Names: Title Social Security Number		
	Address Phone No		
8. Name and address of agent for service of process			
9.	J		
	affirm that the information given o this application and the attach	ed schedules is true	
10	10. Signature of Applicant Title		
Signature of Preparer if different from above			