

FAIRFIELD TOWNSHIP, BUTLER COUNTY, OHIO
6032 Morris Rd.
Fairfield Township, OH 45011
(513) 887-4400
www.FairfieldTWP.org

Application No.: _____
Good for 90 Days
Start Date: _____
End Date: _____

SOLICITORS AND TRANSIENT VENDORS APPLICATION

(ORC § 505.94, Resolution No. 16-32)

\$25.00 APPLICATION FEE

Hours of Solicitation: 9:00 a.m. to 6:00 p.m. Monday Through Saturday

Transient vendors are prohibited on Sunday

Name of Business: _____ Tax ID Number: _____

Business Address: _____

Business Telephone: _____ Website: _____

Product / Service Being Sold: _____

Applicant's Name: _____

Applicant's Address: _____

Applicant's Telephone: _____ Email: _____

Applicant's Identification: _____ * Attach copy of identification to this application*

Manager / Supervisor Name: _____

Manager's Telephone: _____ Email: _____

Length of Time in Fairfield Township: _____

Please List Any Vehicles Used: (use additional paper if necessary)

License Plate: _____ Make: _____ Model: _____ Color: _____ Year: _____

License Plate: _____ Make: _____ Model: _____ Color: _____ Year: _____

License Plate: _____ Make: _____ Model: _____ Color: _____ Year: _____

Additional Sales People Along with Identification: (use additional paper if necessary)

*** Attach a copy of identification for each sales person to this application***

***** DISCLAIMER: Please be advised this information may be used for WARRANT checks. *****

Background check will take up to 3 business days to complete.

I confirm that I have received, read, and understood this form and Resolution 16-32

Applicant's Signature: _____ Date: _____

Township Signature: _____ Date: _____