



CITY OF FLORESVILLE

PERMIT TO SOLICIT AND SELL WITHIN THE CITY LIMITS

Effective Date: _____ Expiration Date: _____

Name: _____ Local Address: _____

Phone(s): _____

Name and address of company or person represented:

Goods to be sold: _____

Vehicle make, model, year: _____

Vehicle license #: _____ Driver's license #: _____

Permit issue date: _____ Check #: _____

City Manager approval/disapproval, by: _____

Copies: 1) Solicitor/Seller, 2) Floresville Police Department, 3) City Files

1120 D STREET, FLORESVILLE, TEXAS 78114
(830) 393-3105 • FAX (830) 393-2056 • (830) 216-7095 (SA)