TREASURER AND TAX COLLECTOR
Donna Riley, Treasurer and Tax Collector

BUSINESS SERVICES DIVISION
PO Box 3052, Modesto, CA 95353
1010 10th Street, Ste 5700, Modesto, CA 95354
Phone: (209) 525-6549
Email: business-services@stancounty.com

APPLICATION FOR PERMIT UNDER ORDINANCE 6.68 ITINERANT / MOBILE VENDOR

10-Day Permit ☐		**30-Day Permit** ☐		**1-Year Permit** ☐	
Stanislaus County	$ 15.00	Stanislaus County	$ 30.00	Stanislaus County	$ 60.00
State of California	$ 4.00	State of California	$ 4.00	State of California	$ 4.00
Total Fee	**$ 19.00**	**Total Fee**	**$ 34.00**	**Total Fee**	**$ 64.00**

Name of Applicant: _____

Permanent Address: _____

Local Address (if different): _____

Phone: _____ E-Mail: _____

State Identification/Driver's License Information:

ID #:	Sex: M F	DOB:	HT:	Hair:	Eyes:

Do you have a criminal record? Yes _____ No _____ Felony convictions? Yes _____ No _____

If Yes, explain: _____

Vehicle Information:

Year:	Make/Model:	LIC #:	Color:

Type of Goods for Sale: _____

Taco Truck Yes ☐ No ☐ If Yes, Name of Truck:	
State Dept. of Food & Ag Permit #:	Receipt No:
Dept. Of Environmental Resources Inspection Notice Expiration Date:	

Employment Information:

Self Employed: ☐ (Skip to next section)	Employed: ☐	Type of Business:
Employer's Name:	Employer's Phone #:	
Employer's Address:		

STANISLAUS COUNTY ZONING CODES ALLOW ROADSIDE PEDDLERS IN UNINCORPORATED COMMERCIAL OR INDUSTRIAL ZONED AREAS ONLY. _____ (INITIAL)

The undersigned attests, under penalty of perjury, that the statements contained in this application are true.

Signature: _____ Date: _____

For Office Use Only

Permit Issued: _____ Permit Expires: _____

Receipt #: _____ Permit #: _____

Processed By: _____

Copies To: Applicant, Sheriff & DER Office