



**James Colvert**  
 Building Inspector  
 100 Bluff Blvd Sergeant  
 Bluff, IA 51054  
 712-943-9617

**City of Sergeant Bluff**  
 Transient Merchant Application

Please Note: A waiting period of three to seven business days to allow time for application review by the Code Enforcement Officer.

This application must be submitted prior to the issuance of a Transient Merchant permit. This application may not be used for a Transient Merchants license. A photo ID must be shown at the time this application is submitted.

Date of Application		Applicant Name			
Applicant Address				State	Zip
Telephone Number		Company/Business Name			
Company/Business Address				State	Zip
Manager/Supervisor's Name			Telephone Number		
A Brief Description of the Nature of the Business					
Vehicle Make	Model	Year	License Plate Number	State	
Driver's License Number			State	Date of Birth	
Hair Color	Eye Color	Height		Weight	

**Length of Time Sought to be Covered by License** (Not to Exceed 30 Days)

Licenses are in force and in effect from sunrise to sunset (or later with a hosting location's written permission), 7 days a week.  
Each individual must carry their issued permit and display it at the request of a citizen or law enforcement officer.

Beginning Date

Ending Date

Name and location of the last three municipalities where the applicant carried on business within the past two years.

Name

Location

Name

Location

Name

Location

Do you have any prior criminal convictions?     No     Yes

If so, please explain.

**Cost and Duration of Licenses**

(Not to exceed 30 days)

**Application Fee:** \$5.00 per applicant

**License Fee and Duration:** License for one month is \$10.00

Have you ever applied and been denied a license under this chapter?     No     Yes

If so, please explain.

Have you ever had a license under this chapter revoked?     No     Yes

If so, please explain.

Additional Comments.

**Acknowledgment:**

I hereby certify that all statements made herein are true and correct to the best of my knowledge. I understand that all information will be verified by the local law enforcement agency. I understand that false statements made to the enforcement are punishable under Section 718.6 of the Code of the State of Iowa and subject to prosecution. I understand that the City of Sergeant Bluff may, at any time, revoke this license pursuant to Section 122.11 including but not limited to when a legitimate complaint is filed and verified by law enforcement. The fees paid for this license are non-refundable in the event of revocation.

I certify that I have reviewed the applicable provisions of Chapter 122 of the Sergeant Bluff Code of Ordinances. I agree to abide by all applicable local, state and federal regulations in the conduct of any business engaged in with a license issued as a result of this application.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

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**For Code Enforcement Officer Only**

Date Received \_\_\_\_\_

Approved

Denied

Reason/Explanation \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Code Enforcement Officer

\_\_\_\_\_  
License Number