



EL DORADO

THE FINE ART OF LIVING WELL

City of El Dorado Vendor Stand Procedure

- Customer/Business must turn in a complete “Application for Permit and/or License Vendor Stand”
- The City of El Dorado requires copies of ENLARGED/Current/Valid ID's for ALL people that will have contact with City of El Dorado residents.
- Could take up to 72 hours to have all background checks to be completed & application approved by City of El Dorado Police Chief.
- Customer/Business is to pay \$50/day or \$500/approved year period.
- If customer/business decides to pay daily, after 10 days the rate will roll to the 1 year period. The customer is responsible for bringing all paperwork (receipts & certificates), to prove their business has paid for 10 days & get their 1 year certificate. Year begins date of the 1st permit & ends 364 days later.
- All customers/business associates must carry with them at all times a copy of the Vendor Stand Certificate for the days approved.

A CITY OF CHARACTER

220 E. First | PO Box 792 | El Dorado, Ks 67042 | Phone 316.321.9100 | Fax 316.321.6282

www.eldoks.com



EL DORADO

City of El Dorado
220 E. 1st Ave.
PO Box 792
El Dorado, KS 67042

**APPLICATION FOR PERMIT AND/OR LICENSE
VENDOR STAND**

Transient Vendor: \$50 per day \$500 annual

Applicant's Name: _____

Business/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: (Daytime) _____ (Evenings) _____

KANSAS SALES TAX #: _____

PERSONAL INFORMATION:

Driver's License (State/Number): _____

Dates applicant will be selling: _____

Location of Stand: _____

Description of products: _____

VEHICLE INFORMATION

Year _____ Make _____ Model _____ Color _____ State License No. _____

I do hereby solemnly swear (or affirm) under penalty of law that the information provided herein is true and correct.

Signature of Applicant

Date

No city license shall be issued until the applicant complies with all codes and ordinances of the City of El Dorado. Each individual desiring to sell will be subject to a background investigation.

FOR CITY HALL USE ONLY

Application Received By: _____
Signature *Date*

Amount Received: _____ Receipt No. _____



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City of El Dorado

220 E. 1st Ave.

PO Box 792

El Dorado, KS 67042

BACKGROUND INVESTIGATION

All persons desiring to apply for City of El Dorado licenses will submit the following completed information for *each individual* requesting a vendor's permit or other City license. This form should be submitted at least 24 hours in advance of the event or before the goods or services offered. A copy of photographic identification may be required, along with other specific required documents and assurances, depending upon specific license requirements as required by ordinance.

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____ Birth date: _____

Driver's License State: _____ Driver's License Number: _____

Home Address: _____ State: _____ Zip: _____

Home Phone Number: () _____ Cell Phone: () _____

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____ Birth date: _____

Driver's License State: _____ Driver's License Number: _____

Home Address: _____ State: _____ Zip: _____

Home Phone Number: () _____ Cell Phone: () _____

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____ Birth date: _____

Driver's License State: _____ Driver's License Number: _____

Home Address: _____ State: _____ Zip: _____

Home Phone Number: () _____ Cell Phone: () _____

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____ Birth date: _____

Driver's License State: _____ Driver's License Number: _____

Home Address: _____ State: _____ Zip: _____

Home Phone Number: () _____ Cell Phone: () _____

FOR CITY HALL USE ONLY

Official Reviewing Application: _____ Date: _____ Time: _____

License/ Permit Granted () / Not Granted () Reason: _____

Notes: