



MAYOR AND CITY COUNCIL OF LAUREL  
OFFICE OF THE FIRE MARSHAL AND PERMIT SERVICES

8103 Sandy Spring Road Laurel, Maryland 20707-2502  
Phone: (301) 725-5300 FAX (301) 490-5068  
Web: <http://www.cityoflaurel.org> Email: [fmpr@laurel.md.us](mailto:fmpr@laurel.md.us)



**VENDING/PEDDLING/SOLICITING TEMPORARY LICENSE**  
(DO NOT USE THIS FORM FOR FOOD VENDORS OR DOOR-TO-DOOR SOLICITATIONS)

DATE OF APPLICATION: \_\_\_\_\_

DATE(S) OF EVENT: \_\_\_\_\_

*ALL ITEMS BELOW MUST BE COMPLETED. FAILURE TO PROVIDE FULL AND ACCURATE INFORMATION CAN RESULT IN APPLICATION REJECTION AND/OR DENIAL. ATTACH THE FOLLOWING TO THIS APPLICATION: (1) PROOF OF IDENTITY, ISSUED BY THE STATE OF MARYLAND OR OTHER RECOGNIZED GOVERNMENT (2) A COMPLETE LISTING OF ANY OTHER LICENSES OR PERMITS ISSUED TO THE APPLICANT BY THE CITY WITHIN THE FIVE (5) YEARS PRECEDING THE DATE OF THIS APPLICATION.*

PLEASE PRINT CLEARLY

**APPLICANT INFORMATION**

APPLICANTS NAME: \_\_\_\_\_

APPLICANTS ADDRESS: \_\_\_\_\_

\_\_\_\_\_

MD STATE DRIVERS LICENSE/ID NUMBER: \_\_\_\_\_

APPLICANTS TELEPHONE NUMBER: (    ) \_\_\_\_\_ - \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? YES OR NO  
(CIRCLE ONE)

**LICENSEE INFORMATION**

LICENSEE COMPANY NAME/LICENSEE NAME: \_\_\_\_\_

LICENSEE ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**VEHICLE INFORMATION (IF APPLICABLE)**

VEHICLE IDENTIFICATION NUMBER: \_\_\_\_\_

VEHICLE TAG NUMBER: \_\_\_\_\_

MAKE OF VEHICLE: \_\_\_\_\_ MODEL OF VEHICLE: \_\_\_\_\_

YEAR OF VEHICLE: \_\_\_\_\_

**GOODS, WARES, MERCHANDISE INFORMATION**

DESCRIPTION OF PRODUCTS TO BE SOLD: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFY LOCATION WHERE ITEMS WILL BE SOLD (IF APPLICABLE): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I DO SOLEMNLY DECLARE AND AFFIRM, UNDER THE PENALTIES OF PERJURY, THAT I, THE OWNER, OR AGENT OF THE OWNER AUTHORIZED TO APPLY FOR THIS LICENSE, HEREBY CERTIFY THAT THE APPLICATION AND CONTENTS ARE TRUE AND CORRECT, THAT ALL ACTIVITIES PERFORMED UNDER THIS LICENSE WILL BE IN ACCORDANCE WITH CHAPTER 8, ARTICLE V, SECTIONS 8-51 THROUGH 8-55 OF THE CODE OF THE CITY OF LAUREL MARYLAND.*

SIGNATURE OF APPLICANT: \_\_\_\_\_

<b>Office Use Only:</b>	
LICENSE FEE DUE:	= \$ <u>    \$100.00    </u>
REPLACEMENT OF LOST OR MUTILATED LICENSE (CIRCLE ONE): \$25.00 EA.	\$ _____

**PROHIBITED ACTS AND OTHER CONDITIONS:**

1. OPERATION UNDER THIS LICENSE IS ONLY PERMITTED BETWEEN THE HOURS OF 9:00 A.M. - 8:00 P.M. DAILY.
2. FAILURE TO ABIDE BY THE LAUREL CITY CODE MAY RESULT IN SUSPENSION OR DENIAL OF THIS LICENSE.
3. VENDING RESTRICTIONS: NO VENDOR IS PERMITTED ON ANY PUBLIC SPACE OR CITY PARK OR WITHIN 25 FEET OF ANY PUBLIC RIGHT-OF-WAY, STREET, INTERSECTION OR PEDESTRIAN CROSSWALK; WITHIN 25 FEET OF ANY LOADING ZONE OR BUS STOP; IN ANY AREA WITHIN 100 FEET OF A BUILDING ENTRANCE OR EXIT, OR 250 FEET OF A HOTEL OR MOTEL BUILDING ENTRANCE OR EXIT; WITHIN 50 FEET OF DISPLAY WINDOWS OF A FIXED BUSINESS LOCATION; IN ANY AREA WITHIN 1,000 FEET OF A HOSPITAL, COLLEGE, UNIVERSITY, ELEMENTARY SCHOOL, MIDDLE SCHOOL OR HIGH SCHOOL, STATE OR FEDERAL BUILDING; WITHIN 25 FEET OF ANY FIRE HYDRANT OR FIRE ESCAPE; OR WITHIN 25 FEET OF ANY PARKING SPACE OR ACCESS RAMP DESIGNATED FOR PERSONS WITH DISABILITIES.
4. LICENSEE IS REQUIRED TO NOTIFY THIS DEPARTMENT WITHIN 15 DAYS OF LICENSE/LICENSEE CHANGES TO INCLUDE NAME, ADDRESS, TELEPHONE NUMBER, ETC.

<b>APPROVED By the Office of the Fire Marshal and Permit Services:</b>	<b>Date:</b>
<b>APPROVED by the Director of Budget and Personnel Services:</b>	<b>Date:</b>

<b>OFFICE USE ONLY: LICENSE NO.:</b> _____
--