



**City of Kimball**  
 223 South Chestnut Street  
 Kimball, NE 69145  
 308.235.3639

**APPLICATION/REGISTRATION FOR VENDORS/PEDDLERS**

Business or Organization: \_\_\_\_\_

\_\_\_\_\_

Date(s) requesting to sell: \_\_\_\_\_

Date issued: \_\_\_\_\_ Date Expires: \_\_\_\_\_

Applicant Name:		Phone:	
Current Address:		Social Security #	
Previous Address:		Driver's License or ID#	

Description of products or service to be sold: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_  
 Date

FEE PAID: _____
RECEIPT #: _____

POLICE DEPARTMENT	
Issue Permit	<input type="checkbox"/> Yes <input type="checkbox"/> No
Signature: _____	

**Fees:**  
 Daily - \$10.00 Per Person  
 Weekly - \$25.00 Per Person  
 Annual - \$100.00 Per Person