



*City of Barstow*  
*PO Box 98*  
*Barstow, TX 79719*  
*432-445-6838*

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# *City of Barstow*

## VENDOR/PEDDLERS

### Permit Check List

- ☐ State of Texas Sales Tax
- ☐ Food Handler's Certificate (Food Vendor)
- ☐ Written Permission from the Property Owner
- ☐ \$10,000 Surety Permit Bond
- ☐ Police Department Registration/Criminal History Check
- ☐ Mobile Food Vendor Permit
  - ☐ \$100 per month
  - ☐ \$1200 per year
- ☐ Vendor/Peddler Permit
  - ☐ \$50 per day
  - ☐ \$250 per month
- ☐ Seasonal Vendor (Fruit, Shaved Ice, Snow Cones) April 1<sup>st</sup> thru September 31<sup>st</sup>
  - ☐ \$250 per month
  - ☐ \$750 per season

*City of Barstow*

# PEDDLER PERMIT

## Written Authorization of Property Owner

I, \_\_\_\_\_, am the legal  
property owner of \_\_\_\_\_,  
Barstow, Ward County, Texas. Further, I do hereby give  
\_\_\_\_\_ permission  
to be on said premise(s) between the dates of  
\_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_ to  
\_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_. This  
written authorization is granted regarding the  
requirement of City of Barstow, Ordinance 2021-05-13.

**Property Owner's Signature**

Date \_\_\_\_\_

## ACKNOWLEDGMENT

STATE OF \_\_\_\_\_ §

§

§

COUNTY OF \_\_\_\_\_ §

§

This instrument was acknowledged before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_.

Notary Public, State of \_\_\_\_\_

## Notary Commission Expires

# RESOURCES

## **Texas Sales & Use Tax**

<https://comptroller.Texas.gov/taxes/permit>

## **Federal Employer ID Application**

<https://www.irs.gov/businesses>

## **Food Handlers Certification**

[www.360training.com](http://www.360training.com)

## **Background Check**

- Pecos Police Department  
432-445-4911  
172 Raul Florez Blvd  
Pecos, TX 79772
- Reeves County Sheriff's Department  
432-445-9001  
500 S Oak Street  
Pecos, TX 79772
- Monahans Police Department  
432-943-3254  
114 S Bruce Ave  
Monahans, TX 79756
- Monahans Sheriff's Department  
432-943-6703  
300 E 4<sup>th</sup> St  
Monahans, TX 79756

# City of Barstow

## OPERATIONAL PERMIT APPLICATION

Date: \_\_\_\_\_

Product or Item Sold Permit Requested for: \_\_\_\_\_

### Vendor Business Details:

Business Name: \_\_\_\_\_

Official Business DBA Registered Name: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_

Business Contact Number: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Sole Proprietor \_\_\_\_\_ LLC \_\_\_\_\_ Corporation \_\_\_\_\_ Other

Year Business Formed: \_\_\_\_\_ EIN or Tax ID: \_\_\_\_\_

### Personal Details:

Full Name Business Owner: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Salesman Details:

*Any person going door to door (including companions) must be registered with the City of Barstow and subject to screening.*

#### 1. Salesman (if applicable)

Legal Name (must match government ID): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Exp: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

2. Salesman (if applicable)

Legal Name (must match government ID): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Exp: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

3. Salesman (if applicable)

Legal Name (must match government ID): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Exp: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

**References:**

- Name: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Type of Reference: \_\_\_\_\_ Personal \_\_\_\_\_ Business
- Name: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Type of Reference: \_\_\_\_\_ Personal \_\_\_\_\_ Business
- Name: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Type of Reference: \_\_\_\_\_ Personal \_\_\_\_\_ Business

**Previous Experience:**

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Duration: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Duration: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Duration: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Duration: \_\_\_\_\_

Requested Duration for Permit/License:

From: \_\_\_\_\_ To: \_\_\_\_\_

**Required Attachments:**

Copy of valid Driver's License or State ID

Recent passport-sized photograph

Proof of business (if any)

Any other required permits/licenses

Copy of background check—must be within the past 30 days

**Declaration:**

I hereby declare that the information provided is true to the best of my knowledge. I understand that any false representation can result in the denial or revocation of the vendor permit. I agree to abide by the rules and regulations set by the City of Barstow, Texas.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_