

TOWN OF DAVIE
OCCUPATIONAL
LICENSE DIVISION

6591 SW 45 ST
 DAVIE, FL 33314
 (954) 797-1112

PEDDLER / SOLICITOR / SEASONAL SALES APPLICATION

DATE 9/8/99 FILING FEE exempt RECEIPT # _____ RECEIVED BY _____

License # _____ Control # _____ Date Issued _____
 APPLICANTS NAME: Robert F. Dickinson / Davie United Methodist Church
 ADDRESS: 8870 SW 49 Court, Cooper City, FL 33328
 PHONE NUMBER: (954) 581-0920
 LOCATION SITE: 6500 SW 47 Street, Davie, FL 33314

HOW LONG DO YOU DESIRE TO DO BUSINESS IN THE TOWN OF DAVIE: October 18 - October 31, 1999

DESCRIBE THE NATURE OF YOUR BUSINESS/GOODS TO BE SOLD: Pumpkins

PERSONAL INFORMATION: Date of Birth 6/20/45 Birth Place Mineola, NY Race cauc.
 Sex M Hair Brown Eyes Blue Weight 210 Height 5'11" Age 54
 Social Security Number _____ Driver License Number _____

LIST ANY CHANGES OF ADDRESS WITHIN THE PAST FIVE YEARS: None

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME, MISDEMEANOR, OR VIOLATION OF ANY MUNICIPAL ORDINANCE? IF YES, STATE NATURE OF OFFENSE AND THE PUNISHMENT OF PENALTY ASSESSED No

NAME OF PRESENT EMPLOYER AND ADDRESS: Davie United Methodist Church
6500 SW 47 St., Davie, FL 33314

VEHICLE INFORMATION: VIN # 2 B3ED4673 PH648541 Year _____
 Tag # DR004W Make Dodge Model Intrepid

The following are required at the time of application:

- | | | |
|---|--|---|
| <input type="checkbox"/> Health Department Permit | <input checked="" type="checkbox"/> Property Owners Approval | <input checked="" type="checkbox"/> Certificate of Insurance no less than \$1,000,000.00 |
| <input checked="" type="checkbox"/> Fingerprints | <input checked="" type="checkbox"/> \$500.00 Clean Up Bond | <input checked="" type="checkbox"/> References from two Broward County Property Owners |
| <input checked="" type="checkbox"/> Surety Bond of \$1,000.00 | <input checked="" type="checkbox"/> Proof of Portable Toilet | <input checked="" type="checkbox"/> 2"x2" Photograph (taken 60 days prior to application) |
| <input checked="" type="checkbox"/> Proof of Sales Tax Number | <input checked="" type="checkbox"/> Parking available | |

I acknowledge that the above marked attachments are required for submission of this application. I have received a copy of section 17 of the Town of Davie Code and acknowledge the restrictions of same.

<u>Robert F. Dickinson, Pastor</u>	<u>Robert F. Dickinson</u>
Print Applicant's Name And Title	Applicant's Signature
Planning & Zoning Approval <u>CE</u>	<u>9/15/99</u>
Police Department Approval <u>SW</u>	<u>9/21/99</u>
Fire Department Approval _____	Date _____
Code Enforcement Approval _____	Date _____
Town Clerk/Council Approval _____	Date _____
(Town Council Approval Needed for Seasonal Sales)	Date _____

Effective Date 09/97

* Traffic Ticket in 1990



Davie United Methodist Church

6500 S.W. 47th STREET
DAVIE, FLORIDA 33314
CHURCH TELEPHONE: 581-0820
PARSONAGE TELEPHONE: 434-7556

City Council of the Town of Davie

Dr. Robert F. Dickinson, Pastor

September 7, 1999

Dear Sirs;

We are writing this letter in support of our vendor's licence application for a pumpkin sale on our property between October 10-31, 1999. The Administrative Council of Davie United Methodist Church, meeting on March 27, 1999, agreed to have this sale on our property as a church-wide fund raiser.

We have rest room facilities located in the church adjacent to the sales area, which will be open during the hours of the sale. We therefore request relief from the porta-let requirement.

We have adequate on-site parking for more than 100 cars.

Enclosed please find the fingerprint card, \$50 clean-up bond, \$1000 general bond, insurance declaration \$ 1,000,000 coverage and application for vendors licence.

Yours in His Service,

Dr. Robert F. Dickinson

Dr. Robert F. Dickinson
Pastor, Davie United Methodist Church

P.S. as a church, we are requesting exemption from the licence fee.

