

**TOWN OF DAVIE**      6591 SW 45 ST  
**OCCUPATIONAL**      DAVIE, FL 33314  
**LICENSE DIVISION**      (954) 797-1112

**PEDDLER / SOLICITOR / SEASONAL SALES APPLICATION**

DATE 11/02/00 FILING FEE Exempt RECEIPT # \_\_\_\_\_ RECEIVED BY SS

License # \_\_\_\_\_ Control # \_\_\_\_\_ Date Issued \_\_\_\_\_ EDWARD G. MATULA

APPLICANTS NAME: SAINT DAVID MENS CLUB

ADDRESS: 3900 S UNIVERSITY DR

PHONE NUMBER: 473-0467

LOCATION SITE: 3900 S UNIVERSITY DR

HOW LONG DO YOU DESIRE TO DO BUSINESS IN THE TOWN OF DAVIE: NOV. 27 To DEC 23

DESCRIBE THE NATURE OF YOUR BUSINESS/GOODS TO BE SOLD: CHRISTMAS TREE SALES  
35 DAYS

PERSONAL INFORMATION: Date of Birth 10-27-34 Birth Place SOUTH PENNA Race C.  
Sex M Hair B Eyes B Weight 170 Height 6' Age 65  
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: Retired

VEHICLE INFORMATION: VIN # 234GH2531PR309363 Year 1993  
Tag # VGF 25L Make Dodge Model VAN

- 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 type="checkbox"/> Fingerprints                         | <input checked="" type="checkbox"/> \$50.00 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"x 2" Photograph (taken 60 days prior to application) |
| <input checked="" type="checkbox"/> Proof of Sales Tax Number | <input checked="" type="checkbox"/> Parking available        | <u>IN FILE</u>   |

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.

Edward G. Matula      [Signature]  
Print Applicant's Name And Title      Applicant's Signature

Planning & Zoning Approval	<u>CF</u>	_____	Date
Police Department Approval	_____	_____	Date
Fire Department Approval	_____	_____	Date
Code Enforcement Approval	_____	_____	Date
Town Clerk/Council Approval (Town Council Approval Needed for Seasonal Sales)	_____	_____	Date

Effective Date 09/97