

Name of Business:

## City of Washburn Itinerant License Application

Date:

Address:				
City:	State:	Zip:		
Phone Number:				
Valid dates of use:				
State of North Dakota License Numb	er:			
Description of goods to be sold:				
Manner in which business to be				
conducted:	Phon	e	Home Visit	
Other:				
Signature:	Printed Name	:		
			Office	use only
Amount Paid:	[	Date:		
Name of Business:	l	License Nun	nber:	
Valid dates of use:				
Auditor Signature:				