



690 Chesterfield Pkwy W  
Chesterfield, MO 63017-0760  
Phone 636-537-4000  
Fax 636-537-4798

**Application for Itinerant Merchant License**  
**By Charitable and Non-Charitable Organizations, Individuals,**  
**Partnerships, Associations or Corporations**

**City of Chesterfield Ordinance No. 91**

Check one:         charitable         non-charitable

**Please print. All questions must be answered.**

Name of organization/business you represent \_\_\_\_\_  
( ) individual    ( ) partnership    ( ) association    ( ) corporation

Business address \_\_\_\_\_

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

Business phone ( \_\_\_\_\_ ) \_\_\_\_\_

The sales event will consist of (check one)     One event         Series of events

Beginning date \_\_\_\_\_ Ending date \_\_\_\_\_

Location(s) of intended sale of merchandise or services:  
\_\_\_\_\_  
\_\_\_\_\_

Written permission to use these premises has been given by:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

List the merchandise or services to be sold \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Does the sales event involve any food articles? \_\_\_\_\_ If "yes", explain

\_\_\_\_\_

Is the organization a non-profit, charitable organization? \_\_\_\_\_

If "yes", please attach a copy of the certification from the State of Missouri as to your tax-exempt status.

If applying for an Itinerant Merchant license for charitable purposes, describe the reason for this sales event and tell what use will be made of the proceeds

\_\_\_\_\_

\_\_\_\_\_

Local address of organization \_\_\_\_\_

\_\_\_\_\_

Relationship between organization and applicant \_\_\_\_\_

\_\_\_\_\_

List names & addresses of officers/partners of the organization

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of previous application, if any \_\_\_\_\_

Give the name and address of the person or organization in direct charge of conducting the solicitation

\_\_\_\_\_

How many sales personnel will be engaged? \_\_\_\_\_ Will sales personnel be paid? \_\_\_\_\_

References: Give names, addresses, and telephone numbers of two individuals who may be contacted as references on the nature and character of this work.

\_\_\_\_\_

\_\_\_\_\_

Has a license issued by the City of Chesterfield ever been revoked or refused? \_\_\_\_\_

## Itinerant Merchant Application

A copy of the Missouri State Retail Sales License must be attached to the application. If the applicant wishes to assert that he/she is not required under Missouri law to have such a license, he/she must provide proof that such a license is not required of him/her.

Every individual, partnership, association or corporation who sells, deals or offers for sale goods, wares, merchandise or articles of food in the City of Chesterfield shall procure from the City Clerk a license and shall pay a license fee of twenty-five (\$25.00) dollars per sales event (not to exceed twenty-eight (28) calendar days). A maximum of two (2) permits per year shall be issued to any person, firm or organization. Charitable organizations are exempt from fee.

It is understood that if a license is granted it must not be used or represented in any way as an endorsement by the City of Chesterfield.

**Itinerant merchants must display the license while conducting business.**

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### Sign this application in the presence of a Notary Public

Signature of applicant \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_

My commission expires \_\_\_\_\_

Notary Public \_\_\_\_\_

<b>For Office Use Only</b>	
<b>Date \$25 fee received</b> _____	<b>Form of Payment</b> _____
<b>Police Chief Approval</b> _____	<b>Date</b> _____
<b>Zoning Approval</b> _____	<b>Date</b> _____
<b>City Clerk Approval</b> _____	<b>Date</b> _____

*Signature of applicants indicates they agree to hold harmless the City of Chesterfield from any and all liability relative to issuance of this Itinerant Merchant license.*

(August 5, 2022)