



# VENDOR/SOLICITOR LICENSE

## City Ordinance 471

City of Mackay | PO Box 509 | Mackay, Idaho 83251-0509  
 208-588-2274 | Fax: 208-588-2294 | mackayidaho-city.com

Please Print Legibly

<b>Applicant Name:</b>				
<b>Physical Address:</b>				
	Street	City	State	Zip Code
<b>Mailing Address:</b>				
	Street or Post Office Box	City	State	Zip Code
<b>Contact Info:</b>				
	Home Phone	Cell Phone	Email	Drivers License #
<b>Description of Goods/Services to be provided:</b>	Describe			
<p>By signing below, the Applicant certifies the above information is correct and they have obtained the appropriate licenses and permits required by the State of Idaho such as Sales Tax Number, Health Department Certificate, etc. The Applicant agrees to abide by the stipulations set forth in Ordinance 471 and shall defend, indemnify and hold the City of Mackay, its officers, officials, employees and volunteers harmless from any and all claims, injuries, damages, losses or suits including attorney fees, arising out of or in connection with the performance of this License.</p>				
<b>Signature:</b>				<b>Date:</b>

TO BE COMPLETED BY CITY CLERK

**This License is valid for the period of one year for a Fee of \$50.00**

From \_\_\_\_\_ to \_\_\_\_\_  
**Issue Date                      Expiration Date**

**City Clerk:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Not Valid Without  
City Seal