

Lake Jackson Police Department

Interstate Commerce Registration on Vendor

You must complete this form and submit it in person along with a valid State I.D. Once you have been approved, this form must be on your person while soliciting in the City of Lake Jackson.

Date: _____

Name: _____ Date of Birth: _____

Drivers License #: _____ State: _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

Company Name: _____ Phone # _____

Company Address: _____

Kind of goods offered for sale: _____

Will you receive or accept payment or deposit of money in advance of final delivery?
(YES) (NO)

What period of time do you wish to solicit or sell in this City?

Signature

For City Manager