



**City of Fort Worth  
Development Services Department  
Door-to-Door Sales Registration Application**

**Submit a Service Request:** <https://fortworth-csrprodawi.motorolasolutions.com/ServiceRequest.mvc/SRIntakeStep2/DSSERREQ?guid=22d2147697744e11b7272dc5135cc0a2>

**Documents Required for Registration (All information must be submitted to be issued a permit):**

- 1) Completed Registration Application *(All fields should be completed)*
- 2) Federal or State Governmental Issued Drivers License or ID Card *(Must be current & valid)*
- 3) Photo Copy of Vendor’s Texas State Sales Tax Certificate *(Must be current & valid)*

**Personal Information**

Name: \_\_\_\_\_

Home of Record Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Type: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Drivers License or ID Card Number: \_\_\_\_\_ Issuing Jurisdiction: \_\_\_\_\_

**Vehicle Information (Vehicle being used during Door-to-Door activities):**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License Plate #: \_\_\_\_\_

**Business Information – (You are an Agent or Employee of):**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Type: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Texas State Sales Tax ID Number: \_\_\_\_\_

**Description of Food, Goods, Services, or Merchandise to be sold:**

\_\_\_\_\_

**Geographical Location of Service Activities:**

**Hours of Vendor Activity/Operations:**

\_\_\_\_\_

By signing this application, I agree to comply with Section 20-145 of the city Code, which states:

- 1) At any residence or business that has “No Soliciting” or “No Trespassing” sign posted on the property....
- 2) At any residence or business where Door-to-Door vendor has been verbally informed that no soliciting of food, goods, services, or merchandise is allowed.
- 3) At any residence before 9:00 a.m. and after 7:00 p.m. Central Standard Time and after 8:00 p.m. during Daylight Savings Time, unless at the occupant's request.

*(Ordinance Number 15245, 091702)*

Vendors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Development Services Department – Development Support Services Division - (817) 392-2222