



1500 Little Flock Drive
Little Flock, Ar. 72756

City Hall 479-636-2081
Fax 479-636-2318

www.cityoflittleflock.com

Application for Peddlers License

Business Name: _____

Business Address: _____

Business Type: _____

Business Phone #: _____

E-Mail Address: _____

Owners Name: _____

Address if different than Business:

Phone # if different than Business:

Nature of Business for Peddlers License:

Dates requesting Peddler's License:

Date Issued: _____

Date Expires: _____

Signature: _____ **Date:** _____

***Little Flock Codification - Chapter 4.28**

***Ordinance 2008-312**

***Fees: 1 Day = \$10.00; 1 Week = \$30.00; 1 Month = \$75.00**

***Hours allowed to operate Monday - Saturday 9:00 am-7:00 pm; Sunday 1:00 pm-7:00 pm**

Office Use Only:

Approved By: _____ Date: _____ Receipt # _____ Permit # _____



Permit for Soliciting

Applicant _____

Business _____

Date of Issue _____

Date Expires _____

Permit # _____

City Admin. Signature _____

City of Little Flock