TOWN OF TELLURIDE
EST.1878

Application For Pick-Up Permit
Lot L (*Bus Circle Off South Mahoney)*

Owner Name _____

Corporate or LLC Name: _____ DBA: _____

Phone: _____ Email: _____

Mailing Address: _____

Proposed Day of Use: _____

Proposed Hours of Operation: _____

Description of Products Sold: _____

_____

_____

Description of Vehicle – Year: _____ Make: _____ Model: _____

Trailer/Delivery Truck Size: _____

Does the Applicant Hold a Town of Telluride Business License? _____

Business License Number: _____ (Please Attach a Copy of Business License)

Description of Business Plan: _____

_____

_____

Description of How Products Are Ordered & Paid For Prior to Pick Up:

_____

_____

_____

Signature Date