LISBON - ITINERANT VENDOR APPLICATION

License Fee: ✓ $25 Temporary Stands (90 days or less)
___ $100 6-Months Permit
___ $150 12-Month Permit

Also Required: ___ Landowner permission (submit letter if fixed location)
___ If roaming, please submit a route map for the Police Chief to review

Fee Exemption: ___ Lisbon Non-Profit School Groups or Charitable and Non-Profits Groups registered with the Secretary of State with IRS Code Section 501

Business Name: Southwestern Advantage Business Phone: 629-204-4485

Business Location in Town: _____

Business Email Address: brezaniova.s@gmail.com

Business Mailing Address: 2451 Atrium Way, 37214 Nashville, Tennesse

Owner's Name: Cynthia Johnstone - Exec VP/Treas/Sec, Dave Causer - President

Home Phone: _____ Cell Phone: +421911308203

Owner's Home Address (CSZ): _____

Residence(s) for last five years: 2451 Atrium Way, 37214 Nashville, Tennesse

List Applicant / Partners / Corporate Officers (Names & DOB required):

Name: Sona Brezaniova | Name: _____ | Name: _____

Address: B.Bjornsona, 27/3 | Address: _____ | Address: _____

Town/State: Prievidza, Slovakia | Town/State: _____ | Town/State: _____

Birthdate: [redacted] | Birthdate: _____ | Birth date: _____

Has applicant's business license ever been revoked: No If yes, why? _____

Has any applicant / partner / corporate officer ever been convicted of a felony? No If yes, describe specific circumstances _____

I, Sona Brezaniova (owner's name), _____ (title) is authorized to sign on behalf of said business, and further declare that the forgoing information is accurate and true to the best of my knowledge and belief, and that the applicant does hereby acknowledge a public records check may be conducted.

Signature: Sona Brezaniova Date: 5/25/2024

Brezaniova'