

APPLICATION FOR PEDDLER'S PERMIT

Name _____ Date of Birth _____ Date _____
(First, Middle, Last)

Home Address _____

Business Address _____

Phone # _____ Work Phone # _____

Description of Merchandise _____

Method of Distribution _____

How long are you selling for? _____

Number of solicitors _____

Names and Addresses of Solicitors: *(use a separate sheet of paper if necessary).*

Email and Social Security # of Solicitors: *(needed to perform a background check) (use a separate sheet of paper if necessary).*

Type of Vehicle _____ Year _____ Plate _____

Provide a copy of each Solicitors driver's license with application.

You must notify the Town Clerk with any addition of Solicitors to this application and provide the above information and adhere to the requirements herein.

THE UNDERSIGNED:

- 1) **ACKNOWLEDGES RECEIPT OF A COPY OF CHAPTER 140 OF THE CODE OF THE TOWN OF HORSEHEADS, "PEDDLING AND SOLICITING" AND AGREES TO ABIDE BY THE RULES AND REGULATIONS OF SAME.**
- 2) **SWEARS THAT HE/SHE IS A CITIZEN OF THE UNITED STATES, AND NEVER BEEN CONVICTED OF A FELONY OR A MISDEMEANOR.**
- 3) **GRANTS PERMISSION FOR THE TOWN OF HORSEHEADS TO CONDUCT AN INVESTIGATION FOR FELONY OR MISDEMEANOR CONVICTION FOR EACH SOLICITOR LISTED ON APPLICATION.**

Signature of Applicant

Sworn to before me this _____ Day of _____ 20_____.

Notary Public

Fees:

\$20.00 per person for background check
\$50.00 for License and one person
\$10.00 for each additional person