## CITY OF NORWICH, NEW YORK HAWKERS, PEDDLERS AND SOLICITORS

## **LICENSE APPLICATION**

| 1.   | FULL NAME OF APPLICANT  |
|------|---|
| 2.   | APPLICANT'S DATE OF BIRTH   |
| 3.   | D.M.V. IDENTIFICATION NUMBER  |
| 4.   | APPLICANT'S PERMANENT ADDRESS   |
| 5.   | APPLICANT'S CONTACT NUMBER – LANDLINECELL   |
| 6.   | COMPLETE NAME OF BUSINESS BEING REPRESENTED BY APPLICANT (IF APPLICABLE)  |
| 7    | ADDRESS OF BUSINESS BEING REPRESENTED   |
| 3. ' | TELEPHONE NUMBER OF BUSINESS – LANDLINECELL   |
| 9.   | HOW MANY YEARS HAS THE BUSINESS BEEN IN BUSINESS?   |
| 10.  | DO YOU EXPECT TO USE A VEHICLE? IF "YES", HOW MANY  |
|      | LIST THE MAKE, MODEL AND LICENSE NUMBER OF ALL VEHICLES USED  |
| 11.  | TYPE OF GOODS OR SERVICES TO BE SOLD  |
| 12.  | LIST THE SPECIFIC PRODUCTS TO BE SOLD   |
| 3.   | METHOD OF DISTRIBUTION:   |
|      | A) DELIVERY AT TIME OF SALE   |
|      | B) FUTURE SHIPMENT TO <u>PURCHASER</u> FROM OUTSIDE NYS   |
|      | C) FUTURE SHIPMENT TO <u>PURCHASER</u> FROM WITHIN NYS  |
|      | D) FUTURE SHIPMENT TO <u>APPLICANT</u> FROM OUTSIDE NYS FOR DIST.   |
|      | E) FUTURE SHIPMENT TO <u>APPLICANT</u> FROM WITHIN NYS FOR DIST   |
|      | F) OTHER  |
|      | ARE YOU DEMANDING, ACCEPTING OR RECEIVING PAYMENTS OR DEPOSITS IN ADVANCE   |
|      | OF FINAL DELIVERY OF PRODUCTS SOLD?   |
|      | OF FINAL DELIVERY OF PRODUCTS SOLD?  IF SO, YOU ARE REQUIRED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH A \$500.00 SURETY BOTH SURED TO PROVIDE THE "CITY OF NORWICH" WITH SURED TO PROVIDE THE "CITY OF NORWICH WITH SURED TO PROVIDE THE "CITY OF NORWICH WITH SURED TO PROVIDE THE "CITY OF NORWI |

| 14.  | . WILL YOU BE COLLECTING DONATIONS OR CON   | TRIBUTIONS?  |
|--|---|--|
| 15.  | . VETERAN EXEMPTION (County Vending License & F   | Proof Required)  |
| 16. HAVE YOU EVER BEEN CONVICTED OF A CRIME? IF YES, STATE CIRCUMSTANCES |   |  |
| 17.  | . CERTIFICATE FROM SEALER OF WEIGHTS & MEA  | ASURES, IF APPLICABLE (Copy Required)  |
| 18.  | . INTERSTATE COMMERCE COMMISSION CERTIFIC (No fee charged if a member of Interstate Commerce) (Pr       |  |
| 19.  | . SALES TAX CERTIFICATE # (Copy Required)   |  |
| 20.  | . COUNTY FOOD PERMIT # (Copy Required)  |  |
| 21.  | . LICENSE FEES: (All License Fees are for a Calendar Y  | ear unless specified otherwise)  |
|  | ANNUAL* \$200.00  | EXPIRES 12/31/   |
|  | *Annual Permit holders are exempted from the Spec<br>specified by their annual permit. Section 383-6, D | cial Events permit requirement as long as they occupy the designated space   |
|  | SEASONAL** \$150.00   | EXPIRES/_/   |
|  | STANDARD** \$ 50.00   | EXPIRES 12/31/   |
|  | NON-PROFIT FUNDRAISING** \$ 10.00   | LIMIT OF FOUR (4) TIMES PER CALENDAR YEAR  |
|  |   | censes are <u>not</u> in effect during Special Events. A license must be on to sell in the designated Special Event area. See vendor ordinance for |
|  | ADDITIONAL EMPLOYEE \$ 50.00  | EXPIRES 12/31/   |
| 22.  | . SPECIFIC APPLICANTS NAME NEXT TO THE LOCA   | ATION OF THE ANNUAL OR SEASONAL LICENSE REQUESTED:   |
| AN   | NNUAL LICENSE   |  |
|  | APPLICANTS NAME:  | N.E. CORNER OF WEST SIDE PARK  |
|  | APPLICANTS NAME:  | N.W. CORNER OF EAST SIDE PARK  |
|  | APPLICANTS NAME:  | S.E. CORNER OF EAST SIDE PARK  |
|  | APPLICANTS NAME:  | N.E. CORNER OF EAST SIDE PARK  |
| SE   | EASONAL LICENSE:  |  |
|  | APPLICANTS NAME:  | KURT BEYER POOL  |
|  | APPLICANTS NAME:  | WEILER PARK  |

| 23. HOW MANY EMPLOYE                            | ES DO YOU HAVE?  |
|---|--|
| NAME, DATE OF BIRTH &                           | DMV ID NUMBERS FOR ALL EMPLOYEES:  |
|   |  |
|   |  |
|   |  |
|   |  |
| 24. I, THE UNDERSIGNED<br>RESPECTS TRUE AND COR | APPLICANT, DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE IN A<br>RECT. |
| DATE  | APPLICANT'S SIGNATURE  |
| LICENSE NUMBER                                  |  |
| APPROVED (CHIEF OF POI                          | (CE) APPROVED (DIRECTOR OF FINANCE)  |