## TOWN OF NEW PALTZ APPLICATION FOR PEDDLERS LICENSE

THIS APPLICATION IS SUBMITTED PURSUANT TO TOWN OF NEW PALTZ LOCAL LAWS #9 OF 1984 and #3 OF 2003 TO REGULATE AND LICENSE PEDDLERS WITHIN THE TOWN OF NEW PALTZ, ULSTER COUNTY, NEW YORK.

## **APPLICANT'S PERSONAL INFORMATION** *Copy of Driver's License must be submitted with application*

Name of Applicant:	Date:
Permanent Home Address:	
Phone: Social Securit	y#:Date of Birth:
Vehicle Information: Year: Make:	Color:State of Registration:
License Plate Number:	U.S Citizen: (check one) Yes:No:
List all arrests and convictions with dates:	
	onvictions and penalty/punishment assessed:
List 3 Business References with name, addres	*
1	
2	
3	SE INFORMATION
Name, address and phone number of Firm Repre-	esented:
Name, address and phone number of Firm from	n which your stock will be purchased:
Description of Goods to be Sold:	
Method of sale:	
Specific Site of Sale (Name of streets):	
To be complete by the Clerk: License Fee \$100	Waived:Cash:Check: #
License Revoked:Reason:	
The undersigned applicant certifies that he/she has repeddlers and will comply with the regulations therein	ead Local Law #9-1984 and #3-2003 relating to the regulation of n contained.

(Affix 2" Square Photo of Applicant Taken within 1 Year of This Application)

(PHOTO HERE)

Applicant's Signature

Town Clerk's Signature

(TOWN SEAL)