

**TOWN OF NEW PALTZ  
APPLICATION FOR PEDDLERS LICENSE**

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

**APPLICANT'S PERSONAL INFORMATION**

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Social Security #: \_\_\_\_\_ 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: \_\_\_\_\_

Nature of offenses resulting in arrest and/or convictions and penalty/punishment assessed:

List 3 Business References with name and address:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**LICENSE INFORMATION**

Name & Address of Firm Represented: \_\_\_\_\_

Name & Address of Firm From Which Your Stock Will Be Purchased: \_\_\_\_\_

Description of Goods to be Sold: \_\_\_\_\_

Site of Sale: \_\_\_\_\_

*To be complete by the Clerk:* License Fee \$50- Waived: \_\_\_\_\_ Cash: \_\_\_\_\_ Check: \_\_\_\_\_

License Revoked: \_\_\_\_\_ Reason: \_\_\_\_\_

The undersigned applicant certifies that he/she has read Local Law #9-1984 relating to the regulation of peddlers and will comply with the regulations therein 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)