

TOWN OF KINGSBURY

APPLICATION FOR PEDDLER'S LICENSE

NAME OF APPLICANT: _____ AGE: _____

ADDRESS OF APPLICANT: _____

ARE YOU A CITIZEN OF THE UNITED STATES? YES _____ NO _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES _____ NO _____

MISDEMEANOR? YES _____ NO _____

IF SO, GIVE DETAILS: _____

NAME OF PERSON, FIRM OR CORPORATION APPLICANT REPRESENTS: _____

ADDRESS OF PERSON, FIRM OR CORPORATION _____

NAMES & ADDRESSES OF PARTNERS OR PRINCIPAL OFFICERS OF CORPORATION: _____

NAME & ADDRESS UPON WHOM A LEGAL NOTICE MAY BE SERVED:

NAME OF WORKER(S):

ADDRESS:

DETAILED STATEMENT OF THE PARTICULAR BUSINESS, TRADE OR OCCUPATION FOR WHICH A LICENSE IS REQUESTED: _____

IF A MOTOR VEHICLE IS TO BE USED BY THE BUSINESS, DESCRIBE THE:

KIND OF VEHICLE _____ LICENSE # _____

KIND OF VEHICLE _____ LICENSE # _____

KINDS OF GOODS, WARES, MERCHANDISE OR KIND OF SERVICE HE DESIRES TO RENDER:

LENGTH OF TIME AND DATES WORKING IN THE TOWN OF KINGSBURY _____

Signature of Applicant

Sworn to before me this _____

Day of _____, 20

Notary Public
