

**TOWN OF BEDFORD
SOLICITOR / PEDDLING
LICENSE APPLICATION
(TOWN CODE CHAPTER 88)**

(Form Revised 6/2005)



Town Clerk's Office

Town Clerk: Lisbeth Fumagalli
Deputy Town Clerk: Nina L. Kellogg
Location: 321 Bedford Road, Bedford Hills, NY 10507
Telephone: (914) 666-4534
FAX: (914) 666-5249
E-mail: TownClerk@BedfordNY.info

LAST NAME: _____ FIRST NAME: _____ MIDDLE NAME: _____

RESIDENCE ADDRESS: _____
 (Include Street Number, Street, City, State, Zip Code)

MAILING ADDRESS: _____
 (If different than residence)

DRIVER'S LICENSE? YES NO STATE: _____ LICENSE ID# _____

PLACE OF BIRTH: _____ CITY: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

NAME OF BUSINESS, TRADE, OR OCCUPATION: _____

ADDRESS OF BUSINESS: _____
 (Include Street Number, Street, City, State, Zip Code, Telephone #)

WILL YOU OPERATE A VEHICLE IN RELATION TO THIS APPLICATION ? YES NO

MAKE: _____ YEAR: _____ COLOR: _____ LICENSE PLATE # _____

DESCRIBE THE GOODS TO BE SOLD:

HAVE YOU EVER BEEN CONVICTED OF A CRIME OR ANY VIOLATION OF ANY MUNICIPAL ORDINANCE (OTHER THAN A TRAFFIC VIOLATION)? YES NO

(If Yes, describe the offense, the court of conviction, and the disposition on the reverse side of this form)

HAVE YOU EVER HAD A LICENSE FOR SELLING, PEDDLING, OR HAWKING, ETC... REVOKED?

YES NO

(If Yes, describe the issuing authority, date of revocation, and the reason it was revoked, on the reverse side of this form)

IF YOU ARE EMPLOYED BY, OR UNDER CONTRACT WITH ANOTHER PERSON, FIRM, OR CORPORATION, FILL IN THE NAME AND ADDRESS OF SAME:

Name: _____ Address: _____

City: _____ State: _____ Telephone #: _____

(You must submit appropriate evidence of employment or contract with another person, and your relationship and authority to represent that person)

APPLICANT'S SIGNATURE: _____ DATE: _____

Notice: Pursuant to the New York State Penal law, Section 210.45, it is a crime punishable as a misdemeanor to knowingly make a false statement herein.

TOWN CLERK'S OFFICE

Date Application Received _____ By: _____

Applicant Fee Received

Vehicle/Conveyance Fee Received N/A

Photographs Received

Referred to Police Department

Application Approved - License # _____

Application Not Approved - reason _____

Town Clerk's Signature _____

Date _____

POLICE DEPARTMENT

Application Received - Blotter Entry # _____

DCJS Processing Fee Received (\$75.00)

Background Investigation Complete (Includes Fingerprint Card)

Applicant Identification Approved

Application Approved

Application Not Approved - Reason _____

Chief of Police Signature _____

Date _____