Peddling and Solicitation Application Form

Village of Harriman

1 Church Street Harriman, New York 10926 (845) 783-4421

Dear Applicant: Please complete this application to determine if you qualify as a Solicitor in the Village of Harriman. Please fill out the application as completely and accurately as possible. A *s_____* **nonrefundable** application fee is required to be submitted with this application.

	1. Ar	pplicant information		
Applicant's Name:				
Former Names, Alias	ses, used in the past 10 yea	ars:		
Home Address:				
Mailing Address:				
Male/Female:	Height:	Weight:	DOB:	
Eye Color:	Hair Color:	Identifying Feature	es:	
(Applicant must sub	mit in-person proof of ide	ntity and 2 copies – Village	Code 102-3J, 102-8C	
Name of Employer/C	Organization you are repre	esenting:		
Address of Employe	r/Organization:			
Phone Number of Er	nployer/Organization:			
Identification of the	members, partners, share	eholders, etc. of the Emplo	yer/Organization:	
Indicate the address	to which all notices unde	r Chapter 102 of the Village	e Code 102-3J, 102-9C are to be s	sent:

2. Vehicle Information

If a vehicle is used in the operation of peddling, please list the following information:

VEHICLE YEAR	VEHICLE MAKE	REGSITRATION NUMBER	<u>STATE</u>
		INSURANCE	
Vehicle Insurance Po	licy	General Liability Insur	ance
Name of Company		Name of Company	
	e		je
A copy of the Insur	ance binder of policy must be	annexed hereto. Each policy must show er	ndorsement to provide the

A copy of the Insurance binder of policy must be annexed hereto. Each policy must show endorsement to provide the Village of Harriman with ten days' notice of any material change or intention to cancel said policy for any cause.

3. Driver's Information				
How many drivers do you currently employ:				
DRIVER'S FULL NAME	DATE OF BIRTH	DRIVERS LICENSE NUMBER		

4. Marketing/Product Information	
A brief description of the type or types of articles or services for which sales, purchases or orders are to be solicited:	
A statement as to the approximate amount to be collected by the applicant and whether in full of partial payment:	
List all other permits, licenses, and registrations held by the Applicant:	
Does this business involve "weighing" a product? If yes, the Applicant shall provide a certificate from the New York State Sealer of Weights and Measures, certifying that all weighing and measuring devices to be used have been examined and approved by that office with this application.	
Does this business involve the handling of food? If yes, the Applicant shall provide a license from the Orange County Health Department with this application.	

5. Disqualifying Status	
Have you ever been convicted of:	
Felony homicide or assault	
Physically abusing, sexually abusing, or exploiting a minor	
□ The sale or distribution of controlled substances	
Sexual assault of any kind	
Are any criminal charges currently pending against you for:	
Felony homicide or assault	
□ Physically abusing, sexually abusing, or exploiting a minor	
The sale or distribution of controlled substances	
□ Sexual assault of any kind	
Have you been criminally convicted of a felony within the last ten (10) years?	□ Yes □ No
Have you been incarcerated in a Federal or State prison within the past five (5) years?	□ Yes □ No
Have you been criminally convicted of a misdemeanor within the past five (5) years involving persons or property?	□ Yes □ No
moral turpitude or violent or aggravated conduct involving persons or property?	
Has a final civil judgment been entered against you within the last five (5) years indicating	that:
□ You had either engaged in fraud or intentional misrepresentation, or	
□ That a debt of yours was non-dischargeable in bankruptcy pursuant to	
11 U.S.C. Section 523 (A)(2), (a)(4), (a)(6) or (a)(19)	
Are you currently on parole or probation to any court, penal institution, or governmental	
antity, including being under being awagt an subject to a two daing device?	
entity, including being under house arrest or subject to a tracking device?	🗆 Yes 🗆 No
Do you have an outstanding arrest warrant from any jurisdiction?	🗆 Yes 🗆 No
Are you currently subject to a protective order based on physical or sexual abuse	
issued by a court of competent jurisdiction?	🗆 Yes 🗆 No
Are you licensed to peddle in any other municipality?	🗆 Yes 🗆 No
If so, please list each license:	
Have you ever been denied or had a peddler's license in any state or municipality revoked?	? 🗆 Yes 🗆 No
If please explain:	

6. Attachments to be Included with Application

The following documentation/information shall be submitted with this application:

Proof of identity by use of any of the following:

- A valid driver's license issued by any State
- □ A valid passport issued by the United States
- □ A valid identification card issued by any State
- A valid identification issued by a branch of the United States military

Proof of Registration:

□ The Applicant shall provide proof that either the Applicant, or the responsible person or entity, has registered with all required regulatory authorities.

Sales Tax Number:

□ The Applicant shall provide a sales tax number for the Applicant, or for the responsible person or entity for which the Applicant will be soliciting.

Business References:

□ The Applicant shall provide two business references located in Orange County or New York State, or some other evidence that the Applicant is of good character and a responsible businessperson.

7. Execution

I understand that by filing this application, I am authorizing the agreeing to allow the Village of Harriman to obtain a name/date of birth background check on me for the purposes of enforcement of Chapter 102 of the Village of Harriman Code.

I have received and reviewed the disclosure information attached to this information and required under Chapter 102 of the Village of Harriman Code.

I understand that any false statement contained in this application shall be grounds for denial/revocation of the license.

Upon oath or affirmation, under penalty of perjury, that based on my present knowledge and belief, the information provided in this application is complete, truthful and accurate.

Applicant signature

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Date

PLEASE NOTE: If more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application.

- A. The Applicant's submission of the application authorizes the Village to verify information submitted with the completed application, including, but not limited to:
- 1. The Applicant's address,
- 2. The validity of the applicant's proof of identity,
- 3. The Applicant's and/or responsible person or entity's state tax identification and special use tax numbers, if any.
- B. The Village may consult any publicly available sources for information on the applicant, including but not limited to databases for any outstanding warrants, protective orders, or civil judgements
- C. Establishing proof of identity is required before registration is allowed.
- D. Identification of the fee amount that must be submitted by the applicant with a completed application.
- E. To the extent permitted by New York State and/or Federal law, the Applicant's background check shall remain a confidential, protected, private record not available for public inspection.
- F. The Village will maintain copies of the Applicant's application form, proof of identity and identification badge. These copies will become public records available for inspection on demand at the Village offices whether or not a certificate is denied, granted or renewed.
- G. The criteria for disqualifying status, denial or suspension of a certificate under the provisions of this Chapter 102 of the Village Code, and submission of this application and the applicant's signature hereto signifies that he/she has read and is familiar with such criteria.

	For Internal Use Only
Date Received:	Police Department Approval:
Permit Date Range:	Reviewed/Approved Village Clerk:
Building/Fire Inspector Approval:	Permit Expiration Date: