



# TOWN OF FALLSBURG

## Peddler's Permit Application



PERMIT # \_\_\_\_\_ for the YEAR \_\_\_\_\_

Date of Application: \_\_\_\_\_ Permit Expires December 31st \_\_\_\_\_

Fee: \$100.00 First Location/Truck \$50.00 Each Additional Location/Truck  
 Minimum 4' sidewalk clearance must be maintained for pedestrian foot traffic at all times

Standing Peddler       Walking Peddler       Food Peddler (Standing or Mobile)

- |                                  |                           |
|----------------------------------|---------------------------|
| 1. Print Full Name: _____        | 4. Legal Address: _____   |
| 2. Print Name of Business: _____ | _____                     |
| 3. Phone: _____                  | 5. Item to be Sold: _____ |

Mobile Peddler	Standing Peddler
Total Number of Trucks _____	Total Number of Locations: _____
Truck #1: Make: _____ Model: _____	Location #1: _____
Year: _____ VIN: _____	_____
Truck #2: Make: _____ Model: _____	Location #2: _____
Year: _____ VIN: _____	_____
Truck #3: Make: _____ Model: _____	Location #3: _____
Year: _____ VIN: _____	_____
Truck #4: Make: _____ Model: _____	Location #4: _____
Year: _____ VIN: _____	_____
Truck #5: Make: _____ Model: _____	Location #5: _____
Year: _____ VIN: _____	_____

Mobile Peddler: Address where vehicles are stored when not in use: \_\_\_\_\_

*I, the undersigned, state that all the information I have given in the foregoing application is true to the best of my knowledge, information and belief.*

Applicant's Signature: \_\_\_\_\_

Town Clerk: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Owner's Proxy

Insurance

Payment Total: \_\_\_\_\_

Registration

Dept. of Health Certificate

Cash/Check: \_\_\_\_\_

Inspection

\_\_\_\_\_ **PB Approval Y / N**