

## Town of New Hampton

## Office of The Selectmen 6 Pinnacle Hill Road New Hampton, New Hampshire 03256

(603) 744-3559 FAX (603) 744-5106

## TOWN OF NEW HAMPTON APPLICATION FOR HAWKERS, PEDDLERS, VENDORS LICENSE

THIS APPLICATION MUST BE SUBMITTED AT LEAST FOURTEEN (14) DAYS PRIOR TO THE REQUESTED EFFECTIVE DATE. THE LICENSING PERIOD EXPIRES AT THE END OF THE TERM FOR WHICH IT WAS GRANTED. See definition of TERM on page 2.

## Please read carefully and complete accurately all items below:

Name of A	Applicant(s):					
Name of 1	Business:					
Address (	of Applicant:					
Applicant's Phone# :		Bu	Business Phone# :		Email:	
Operator:						
Sex:	Age:	Ht:	Wt:	Hair:	Eyes:	
Driver's L	icense# (Photoco	py Required):		DOB:		
Name & A	Address of Emplo	yer (if applicable	e):			
Describe l	Business (List of	goods to be sold	):			
Describe \	Unit to be used:					
License # and State of Unit (when applicable):				U1	nit is Mobile:	Stationary:
Location	where sales will	take place:				
Intended	dates of use - To	begin on:		To end on	:	
Hours of	operation:					
						y the Planning Board in a NO:

If NO, STOP – Site Plan required

1. The appropriate license f	ee: Paid Ca	shPaid Check #:	
a) \$50.00 for 30 or le	• `		
b) \$300.00 for more t			
2. Letter of authorization fr	om the property own	er except in the case of door-to-	door sales.
I hereby swear that the above sta	tements on this appli	cation are true and correct to tl	he best of my knowledge:
	1.1		
Applicant's Signature		Date	
State ofCounty of	f		
	:		
This instrument was acknowledged	l before me on this	date of	20by
		·	
Justice of the Peace/Notary Publi	ic	Date	<del></del>
J			
Term - License granted shall be			
a) Up to 30 or less consecutive			
	•	wkers, Peddlers, Vendors License,	or at midnight, December 31
of the calendar year in whi	ch the license was grai	nted, whichever is shorter.	
<b>PENALTY:</b> Any person violating a	any of the provisions c	of the Hawkers Peddlers Vendors	Ordinance shall be quilty of a
violation and subject to a fine not t			
shall constitute a separate offense h		donars (\$100.00). Each day a vic	viation of safa provisions exist.
1			
*************	******	***********	******
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Town License to Expire on:			
	$\mathbf{AP}$	PROVALS:	
Cliffer the Criffer			
<b>Chief of Police - Signature</b>	Date	Fire Chief - Signature	Date
Selectman Signature	Printed	Name	Date
S			
Calandara and Camard		NI	D /
Selectman Signature	Printed	Name	Date
Selectman Signature	Printed	Date	

A copy of Approved Application to be provided to Applicant and must be on site when open for business.

The following must be submitted to the Selectmen's Office at time of application: