

VILLAGE of CANAJOHARIE

75 ERIE BOULEVARD
CANAJOHARIE, NY 13317
(518) 673-5512 Fax: (518) 673-5517

Mobile Food Vendor or Peddler Application

Date: _____

Name: _____

Address: _____

Date of Birth: _____ Phone No: _____

Location of Solicitation/Vending: _____

Purpose of Solicitation/Types of goods selling: _____

Vehicle Information:

Make _____ Model _____ Year _____

Color _____ License Plate # _____

Applicant's Driver's License # _____ State Issued _____

Copy of Applicants Driver's License Attached: _____

Are you operating as a d/b/a? YES NO If YES, Certificate No: _____

NYS Sales Tax Certificate No. _____

If applicant is employed by someone complete the following:

Business Name: _____

Business Contact Name: _____

Address: _____

Phone: _____

Applicants Signature: _____

Fee: \$10/Day; \$25/Week; \$50/Month; \$400/Year Fee Paid: _____

Not-For-Profit: \$0

Signature of recipient: _____ Date: _____

Permit # _____ Issue Date: _____