



TOWN OF GREENBURGH

TOWN CLERK'S OFFICE

177 Hillside Avenue, Greenburgh, NY 10607
(914) 989-1500 FAX (914) 993-1626
townclerk@greenburghny.com

Judith A. Beville
Town Clerk

(Finger Printing Every 2nd Year)

November 2017

To: All Holders of Town of Greenburgh Peddler's License

Enclosed is your application for a [2018](#) peddler's license as well as instructions.

Please remember that your [2017](#) peddler's license expires this December 31st. Therefore, please complete and return the application with the [\\$100](#) non-refundable fee to the Town Clerk's Office prior to December 31, 2017. For honorably discharged members of the armed forces of the United States, the application fee will be waived.

If you were not fingerprinted for the [2017](#) license, you will need to be fingerprinted for next year's license. Please contact L 1 Enrollment to at 1-877-472-6915 to make an appointment.

If you have any questions, please do not hesitate to call our office.

Sincerely,

Judith A. Beville
Town Clerk

JAB:cp

Encl: Application



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INSTRUCTIONS FOR PEDDLER'S LICENSE

- 1) No individual may engage in the business of peddling or soliciting in the Town of Greenburgh until he/she has a current peddler's license issued and in hand by the Town Clerk's Office. The license is not transferable and must be carried with him/her at all times.
- 2) The license expires on December 31st of the year issued.
- 3) The applicant must submit a completed application, to include three passport size photographs (2" x 2"), full face, bareheaded, on a white background, taken within thirty days of filing the application.
- 4) For food vendors, the applicant will need to provide a copy of his/her County Health Department Permit with the application.
- 5) For first time applicants that are honorably discharged members of the armed forces of the United States, the applicant will need to provide a copy of his/her discharge papers so that the \$100 application fee can be waived.
- 6) Applicant's signature must be notarized.
- 7) Return completed application, pictures, a copy of the driver's license, a copy of the vehicle registration for the vehicle that will be used and the non-refundable application fee of \$100 to the Town Clerk's Office. The applicant will receive a receipt when the application is accepted by the Town Clerk's Office.
- 8) Each applicant must reapply each year with the Town Clerk's Office. However, he/she will only be fingerprinted every other year.
- 9) Then, each applicant must have fingerprints taken, please contact L 1 Enrollment at 1-877-472-6915 to make an appointment. The following non-refundable fees must be paid at that time: a money order/check for \$85.75 in favor of L 1 Enrollment to the Fingerprinting Department. **The ORI # for Town of Greenburgh is NY0595300.**
- 10) Before a license is approved, the applicant will be investigated by a Greenburgh Police Department Representative. The applicant must provide a schedule of the route and stops. As per the Town of Greenburgh Peddler Ordinance, no stop is to be longer than 15 minutes.

TOWN OF GREENBURGH

APPLICATION FOR PEDDLER'S LICENSE

Have you ever received a Peddler's license from the Town of Greenburgh? Yes _____ No _____

If yes, what years? _____ Last year fingerprinted _____

Were your previous peddler's licenses ever revoked or suspended? Yes _____ No _____
 If yes, give particulars below:

Criminal Background

Were you ever convicted of any crime other than a traffic violation? Yes _____ No _____

If yes, how many times? _____ State facts below, if necessary, attach additional sheets of paper)

Date	Jurisdiction	Under What Name	Conviction	Sentence Imposed

Motor Vehicle Information

Make _____ Model _____ Color _____ Year _____

Vin # _____ Reg. Type _____ Reg. Exp. Date _____

NY Motorist ID#: _____ Expiration Date: _____

Owner of Vehicle

Name: _____
Last First Middle

Address: _____
Street Address City State Zip

TOWN OF GREENBURGH
APPLICATION FOR PEDDLER'S LICENSE

Business Information

Business Name _____

Describe the type of services, goods, wares and/or merchandise you wish to sell or solicit orders for:

Westchester County Dept. of Health Permit Number (for food vendors) _____

Name of corporation, firm, association, club, partnership or any other organization represented by the applicant _____

If peddling or soliciting for a Corporation:

Date Incorporated _____ State Incorporated _____ No. of Officers in Corp. _____

For each officer of the Corporation, give the following information (attached additional sheets of papers if necessary):

Name: _____
Last First Middle

Address: _____
Street Address City State Zip

Number of years at this address: _____ Home Phone: _____

Date of Birth: _____ Social Security #: _____
Month Day Year

I swear or affirm that all the foregoing answers to the foregoing questions and statements are true and correct to the best of my knowledge.

Applicant's Signature

STATE OF NEW YORK
COUNTY OF _____

_____ being duly sworn, deposes and says that he/she is the individual making the foregoing application for a Peddler's license; that the answers to the foregoing questions and other statements contained herein are true of his/her own knowledge.

Sworn to before me this _____ day of _____, _____

Signature of Notary Public or Commissioner of Deeds