



# VILLAGE OF PORT CHESTER

Village Clerk

222 Grace Church Street, Port Chester, New York 1057

Phone (914) 939-5202 • Fax (914) 305-2560

[Clerk@PortChesterNY.com](mailto:Clerk@PortChesterNY.com) • [www.portchesterny.com](http://www.portchesterny.com)

## HAWKER AND PEDDLER APPLICATION

DATE RECEIVED:

VILLAGE CODE <a href="#">195-6</a> (Click on the link)	FEE:	Resident - \$435.00 Non-resident – \$560.00
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**TO BE COMPLETED BY APPLICANT**

**APPLICATION MUST INCLUDE PHOTOS OF ALL SIDES OF VEHICLE**

YOUR NAME (FIRST M. LAST)

HOME ADDRESS	SUITE / APT.	TELEPHONE HOME
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CITY	STATE	ZIP CODE	TELEPHONE MOBILE
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E-MAIL

DATE OF BIRTH	HEIGHT	WEIGHT	COLOR OF HAIR	COLOR OF EYES
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COMPANY / BUSINESS NAME	TELEPHONE WORK
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ADDRESS	SUITE / APT.	FAX
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CITY	STATE	ZIP CODE	SECONDARY CONTACT TELEPHONE#
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WHAT ARE YOU SOLICITING FOR:

STATE SALE TAX I.D. #	METHOD OF DISTRIBUTION
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MAKE OF VEHICLE	MODEL	YEAR	VIN NO.
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HAVE YOU EVER BEN ARRESTED FOR ANY CRIME OF MISDEMEANOR?  YES  NO

IF YES, STATE WHEN, WHERE AND WHAT IS DISPOSITION OF CASE IN COURT.

**AFFIRMATION**

I subscribe and affirm, under the penalties of perjury, that the statements made in this application (including statements made in accompanying papers) have been examined by me to the best of my knowledge are true and correct.

SIGNATURE OF APPLICANT	DATE
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State of New York )  
County of Westchester ) SS.: \_\_\_\_\_  
Notary Public

Sworn to before this \_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_  
Notary Public # \_\_\_\_\_  
Qualified in \_\_\_\_\_  
Commission expires: \_\_\_\_\_

**OFFICE USE ONLY**

Police Dept. Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No	Health Department Permit No.:
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Date Approved:	Fee:	Permit #:
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