

Date of application: _____

**TOWN OF AMHERST
PEDDLER, SOLICITOR, TRANSIENT BUSINESS
PERMIT APPLICATION**

PERMIT/FEES:

- PEDDLER/SOLICITOR – 90 DAYS: \$50.00
 TRANSIENT BUSINESS – 90 DAYS: \$50.00

Applicant's Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Local Address (if different): _____

Telephone: home _____ cell: _____

SS#: _____ Date of Birth: _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Business Name: _____

Business Address: _____

Driver's License: (must present when submitting application)

State: _____ Number: _____ Expiration: _____

If presenting a driver's license that is outside Erie County, you must also submit a Police Background Check from each location where you have previously resided.

List any crimes **AND** violations resulting in arrest or conviction: _____
(Failure to disclose may result in rejection of application)

Explain the product/service to be peddled, solicited or vended: _____

New York State Sales Use Tax Number: _____

Days & Hours of Operation: _____

Note: No peddling, soliciting or transient business activities shall be conducted before 9:00 AM or after 8:00 PM. No Mobile Food Vending before 9:00 AM or after 8:00 PM on residential property except for the following: when the truck and vending activities are not located within the required front yard the allowable hours are from 9:00 AM to 11:00 PM. Mobile food vending may be conducted between 7:00AM and 11:00 PM on a non-residential property or in a right-of-way adjacent to a non-residential property.

THIS SECTION FOR TRANSIENT BUSINESS ONLY:

Description of motor vehicle: Year _____ Make _____ State _____

Registration # (VIN): _____ Expiration: _____ Plate#: _____

Location of transient business or mobile food vehicle location: _____

1. If your transient business or mobile food vehicle will reside on private property, you must attach a written letter of consent from the property owner to this application, including contact information (name, address and phone number) of the owner of record.
2. If you are vending food products you must supply a copy of your Health Department Operating Permit before we can accept this application.
3. You must have your vehicle inspected annually by the Town Fire Inspectors. Please call 716-631-7140 between 8:00 AM & 10:00 AM to schedule an appointment.

Signature of Applicant (*This signature indicates consent to having a background check performed.*)

Sworn to me this _____ Day of _____, 20____

Notary Public: _____ Stamp

.....
Chief of Police: Approve _____ Disapprove _____

Signature

Town Clerk: Approve _____ Disapprove _____

Signature

PLEASE NOTE: PEDDLING, SOLICITING OR VENDING IS NOT ALLOWED UNTIL A PERMIT IS OFFICIALLY ISSUED. THE PERMIT MUST BE PRODUCED UPON REQUEST. THERE ARE NO REFUNDS FOR APPLICATIONS THAT ARE DENIED.