



**CHAPTER 10, ARTICLE 4
PEDDLER, HAWKER, SOLICITOR OR CANVASSER
APPLICATION (\$75 FEE)**

License No. _____

Fee Paid _____

Date _____

Applicant's Full Name _____ SS# _____

Permanent Home Address _____

Home Phone Number _____ Cell Phone Number _____

Email Address _____

Business Description _____

Goods to be Sold or Services Rendered _____

Name & Address of Employer _____

Length of Time License Desired _____

Name & Addresses of Manufacturers or Producers _____

Has Applicant ever been convicted of any crime or disorderly persons offense or violation of any Borough Ordinance? If so, the nature of the offense and the punishment or penalty assessed thereof:

Name and Address of Two Residents of Passaic County _____

**PROOF OF INSURANCE AND VALID DRIVER'S LICENSE REQUIRED.
HOURS OF OPERATION 9 AM - 6 PM MONDAY - SATURDAY**

Describe Vehicles to be used _____

Make, Model and License Plate Number _____

Registration Number of Vehicle _____

Signature of Applicant _____

Sworn to before me this ____ day of _____ 20__

-----**FOR MUNICIPAL USE ONLY**-----

I hereby approve _____

I hereby disapprove _____

Of the Issuance of a Peddler's/Solicitor's License

To _____

For _____

From _____

CHIEF OF POLICE (Signature)

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HOURS OF OPERATION 9 AM - 6 PM MONDAY - SATURDAY**