

Peddler's Permit Application

VILLAGE OF MINOA 240 N. Main Street Minoa, New York 13116 Office 315-656-3100 Fax 315-656-0825 www.villageofminoa.com

Date:		
Applicants Name:		
Address:		
Telephone:		Email:
Driver's License #	(Attach copy of license)	Social Security #
Signature:		
		ense of the applicant, prior to the Peddler Permit approval. ned from time to time by the Village Board. dor Information
Company being repress	• •	
Address:		
Telephone:	Website: _	
Employer Identification	Number (EIN):	
Merchandise or Service	es being solicited:	(Attach brochure or pamphlet)
Description of vehicles:	(Make / Mode	el / Color / License Plate)
Is payment of deposit o	f money in advance of final YES o	delivery of services or product being requested? r NO
	If yes, see VOM Code Section	on 110-6 Bonds Required.
Date(s) Applicant will l	oe Soliciting in Village:	
Pagaina d I	******OFFICE U	
Fee for Rackground Ch		Date: Paid:
		Paid: