Town of Londonderry, NH 432-1100 x.115

APPLICATION AND PERMIT FOR ITINERANT VENDOR'S LICENSE

APPLICANT'S NAN	E:PHONE #						
CURRENT ADDRESS: (No. Street City State Zip)							
	(No. Street	City	State	Zip)			
APPLICANT'S DAT	TE OF BIRTH:	NON-PROFIT ID (if applicable)					
BUSINESS NAME:							
ADDRESS OF WHE	CRE MERCHANDISE I	S TO BE SOLD:	WHAL				
PROPERTY OWNE	R'S NAME	W W	TO STATE OF THE PARTY OF THE PA				
PHONE #		attach w <mark>r</mark> itten per	mission letter fr	<mark>om property owner</mark>	•)		
	D BE SOLD:						
WIERCHANDISE TO	DESOLD.			1			
FOR DOOR TO DO	OO <mark>R VENDING, VEH</mark>	ICLE INFO RE	QUIRED FOR	EACH PERSON	VENDING		
MAKE	MODEL & YEAR		PLA	TE NO.			
MAKE	MODEL & YEAR	A COMPANY	PLA	TE NO.			
MAKE	MODEL & YEAR	A STATE	PLA PLA	TE NO.			

PLEASE CHOOSE/CIRCLE ONE:

- 1. <u>30-DAY PERMIT:</u> For a permit which authorizes place-to-place vending or for a permit for a single vending site, and for a period of any number of days up to and not exceeding <u>30 days</u>: \$35.00
- 2. <u>SEASONAL PERMIT</u>: For a permit which authorizes place-to-place venting or for a permit for a single vending site, and for a period of any number of days up to and not exceeding <u>90 days</u>. \$75.00
- 3. <u>Multiple Vending Sites</u>: For a license for multiple vending sites, and for a period of any number of days up to and not exceeding 30 days: \$50.00*. (*In addition, the license shall pay a fee of \$5.00 per vending site for the period covered by the license.)

The dates, days and hours you will be open for business:

Date:	Hours of Operation - From:	To:	
Date:	Hours of Operation – From:	To:	
Received copy of State of	NH Hawkers/Peddlers license	YES	_ N/A
Received copy of State of	NH Department of Health Permit	t YES	_ N/A
Signature of Applicant: _		Date:	
PRINT NAME:	DONDERRY, NI	EWHA	
	(FOR TOWN US	Date: Date:	