Village of Liberty Clerk 167 North Main St Liberty NY 12754 (845) 292-5110



Peddler Permit

(For Annual, 1 Month or 1 Day)

Name of Applicant:					
Date of Birth:	SSN:	SSN:			
Home Address:	Email:	Email:			
Primary Phone:	Secondary Phone	Secondary Phone:			
Government Issued Photo ID Number:					
Proof of Insurance	Yes	No	N/A		
Workers Compensation	Yes	No	N/A		
I am Requesting a Permit for (Length)	1 Year	1 Month	1 Day		
Business Name:					
Name and Address of Firm Represented:					
Description of Goods for Sale:					
New York State Sales Tax Number:					
Description of Motor Vehicle used in connection with the License (Make, Model and Color):					
Transient Merchants Only (Average Quality of Goods for Sale and How they will be sold):					
I, the undersigned, declare that the information probest of my knowledge. I understand that any misre the denial or revocation of the peddler's permit.	ovided in this applic epresentation or om	ation is true and co	orrect to the on may result in		
Signature:	Date:				
Office Use Only					
Code Enforcement Officer:		Date:			
Chief of Police:		Date:			
Village of Liberty Clerk:		Date:			

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BackGround Check Authorization

Fingerprinting is required when applying for a Peddler's Permit. Contact L1 Enrollment Services at 877-472-6915 or www.L1enrollment.com and use ORINY0522000. Theres is a charge for this service; make payment directly to L1.

Name:					
Date of Birth:		SSN:			
Home Address:		Email:			
Primary Phone:		Secondary Phone:			
List of any other names you hav	e ever used:				
List of nicknames you have ever	used:				
List in reverse chronological orde	er all of the places you	have resided in the	past 3 years		
Street name and number	City o	or Town	State	Country	
		,			
Have you ever been convicted of	a crime? If yes, explain	n			
a a					
I hereby give The Village of Lib regarding my past history. This determine whether I have ever statements on this application i have applied. I declare under the best of my knowledge, info	s background check in been convicted of any will result in immedia penalty of perjury tha	ncludes, but is no y crime or have a te disqualification	t limited to, a recor criminal record. Gi n for the permit or l	rds check to iving false license for which	
Signature:	9		Date:		
	Office U	Jse Only			
	Fingerpri	nt review			
Chief of Police:	Approved		Denied		
Village of Liberty Clerk:	Approved		Denied		

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Peddler Permit

Application Checklist

To Apply for Annual, 1 Month or 1 Day Permit Submit the Following Items

*******Incomplete Applications will not be processed *******

1: Completed Application Form

2: Completed Background Check Authorization Form

3: Copy of your Government issued Photo ID

4: Certificate of Liability Insurance. You must carry liability insurance making the Village of Liberty as additional insured, for combined single limits of no less than \$1,000,000 per occurrence and \$1,000,000 general aggregate.

4: Proof of Workers Compensation/disability (Form C-105.) or Proof of Exemption (Form E-200). Forms can be found on wcb.ny.gov

6: Copy of a permit in accordance with New York State Regulations regarding mobile food services as found in Part 14 of the New York State Sanitary Code; and Description of type of fuel being used for all purposes. (Mobile Food Licenses ONLY)

7: One passport size (2" x 2") photo

Peddler Rules: Can be Found in the Village of Liberty Code Section 41-9 "General Restrictions"

No