

**TOWN OF ONEONTA
PEDDLER/SOLICITOR LICENSE APPLICATION**

Name of Applicant: _____

Permanent Home Address: _____

Telephone Number: _____

Name of Business or Firm: _____

Address: _____

Telephone Number: _____

A brief statement of the nature of the business and a description of the merchandise or service to be sold _____

Vehicles to be used:
Number: _____ Make & License # _____

If employed, Name and Address of Employer: _____

Representatives/Canvassers
Name and Address: _____

Name and Address: _____

Name and Address: _____

Name and Address: _____

Length of time license is desired: _____

New York State Tax Number: _____

Place where goods/merchandise to be sold is manufactured or produced: _____

APPLICATION REQUIREMENTS:

- Two (2 X 2) photographs of applicant taken within 60 days immediately prior to the date of application.

- Two business references located in the County of Otsego, State of New York, or, in lieu thereof, such other available evidence of the character and business responsibility of the applicant as will enable an investigator to properly evaluate such character and responsibility.

References

1. Name and Address: _____

2. Name and Address: _____

- Have you ever been convicted of any crime, misdemeanor or violation of any municipal ordinance? _____

If so, describe the nature of the offense, penalty, and date. _____

- Evidence of a current certificate from a Sealer of Weights and Measures

- Evidence, if dealing in the sale of prepared foods, of Department of Health approval, or if dealing in raw food, of compliance with the requirements of the Agriculture and Markets Law of the State of New York

- Workmans Compensation Policy in effect? YES () NO () N/A () . State law requires those engaging in hazardous employment to have a workers' compensation/disability coverage in effect.

A. Workers Compensation Secured by Contractor: _____(Y/N)

B. Disability Benefits Secured by Contractor: _____(Y/N)

- \$100.00 License fee. Application shall be accompanied by a " License and Permit Bond" or equivalent cash surety to the Town of Oneonta, in the penal sum of \$5,000.00

- Evidence of a valid " Certificate of Authority" to collect sales tax pursuant to New York State Tax Law Section 1134.

I certify that the foregoing is true and accurate. I understand that any false statement or violation of Chapter 64 may result in the immediate revocation of this license, as well as any appropriate penalties.

Sworn to before me this

____ day of _____, 200_

NotaryPublic

Signature of Applicant

Town Clerk Date

Copy to Town Constable



Western Surety Company



SAMPLE



LICENSE AND PERMIT BOND

For County, City, Town or Village Only-Not Valid for Bonds Required by the State. Not Valid for Contract, Performance, Maintenance, Subdivision, Agent to Sell Hunting and Fishing Licenses or Utility Guarantee Bond.

KNOW ALL MEN BY THESE PRESENTS:

BOND No. L & P- [REDACTED]

That we, _____ of the _____ of _____, State of _____, as Principal, and WESTERN SURETY COMPANY, a Corporation duly licensed to do business in the State of _____, as Surety, are held and firmly bound unto the _____ of _____, State of _____, Obligee, in the amount of _____ (Valid only when a County, City, Town or Village is named as Obligee) (\$ _____) DOLLARS, (NOT VALID FOR MORE THAN \$25,000)

lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the Principal has been licensed _____ by the Obligee.

NOW THEREFORE, if the Principal shall faithfully perform the duties and comply with the laws and ordinances (including all amendments), pertaining to the license or permit, then this obligation to be void, otherwise to remain in full force and effect for a period commencing on the _____ day of _____, 19____, and ending on the _____ day of _____, 19____, unless renewed by continuation certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing to the Obligee and to the Principal, in care of the Obligee or at such other address as the Surety deems reasonable, and at the expiration of thirty-five (35) days from the mailing of notice or as soon thereafter as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall be relieved from any liability for any subsequent acts or omissions of the Principal.

Dated this _____ day of _____, 19____.

Principal

Principal
WESTERN SURETY COMPANY

Countersigned

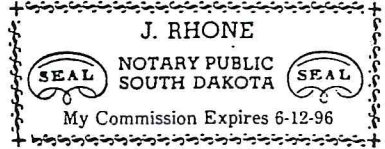
By _____
Resident Agent

By *Joe P. Kirby*
President

ACKNOWLEDGMENT OF SURETY (Corporate Officer)

STATE OF SOUTH DAKOTA }
County of Minnehaha } ss

On this _____ day of _____, 19____, before me, the undersigned officer, personally appeared Joe P. Kirby, who acknowledged himself to be the aforesaid officer of WESTERN SURETY COMPANY, a corporation, and that he as such officer, being authorized so to do, executed the foregoing instrument for the purpose therein contained, by signing the name of the corporation by himself as such officer. IN WITNESS WHEREOF, I have hereunto set my hand and official seal.



J. Rhone

Notary Public, South Dakota
Western Surety Company
1-605-336-0850