



CITY OF BEACON

PEDDLING & SOLICITING PERMIT APPLICATION

Application Checklist

Peddlers License: allows peddling, vending, hawking, selling or soliciting orders for merchandise, seeking donations or conducting surveys in the streets and public ways of the City, or house-to-house and/or door-to-door. This includes public streets, highways and parkways.

PLEASE REVIEW CHAPTER 163 OF THE CITY CODE OF THE CITY OF BEACON PRIOR TO SUBMITTING APPLICATION

For an application to be considered complete, the following must be included:

- Written application for permit with **notarized signature**
- Application processing fee: \$15 (non-refundable)
- Valid photo ID. NYS Driver's License or Non-drivers ID card.
- Certificate from Dutchess County Department of Health, if selling and/or serving any food not pre-packaged. If scooping ice cream, certificate needed. (Department of Health, 387 Main Street, 845-486-3469)
- Proof of Insurance. Proof of Workers Compensation Insurance is required for all employees, if applicable.
- Background Screening. Go to www.identogo.com or call 877-472-6915 to make an appointment for fingerprinting. Once completed, print and submit the report for review by the Police Chief.
- Certificate of Authority from NYS Department of Taxation and Finance to collect sales taxes.
- Certificate issued by Dutchess County Sealer for Weights and Measures, if using scales or measures.

Vendors issued a permit CANNOT:

- Vend/ peddle within 200ft. of school property
- Vend/ peddle within a 1,000 foot radius of any established, similar fixed business
- Vend/ peddle on private property, unless stand meets all requirements of the Building Code as approved by the City of Beacon Building Inspector or his designated agent
- Allow assistant to peddle without accompanying license holder
- Ring bell of, knock at or enter building where posted "No Peddlers," "No Solicitors," or other wording where the purpose of which is to prohibit peddling/soliciting.
- Leave cart, vehicle, or any other belongings overnight.

Contact information:

For questions regarding the peddler's permit application/process:

Elizabeth Evans Assistant to the Mayor

845-838-5010

cityofbeacon@cityofbeacon.org

Dutchess County Department of Health

387 Main Street (between North Hamilton and Academy Streets)

845-486-3469

Department of Consumer Affairs

98 Peach Road

Poughkeepsie, NY

845-486-2949

NYS Department of Taxation and Finance

www.tax.ny.gov

Peddling & Soliciting Permit Application



Submit Forms to *the Office of the City Administrator*
One Municipal Plaza
Suite One
Beacon, NY 12508

(845) 838-5010
FAX (845) 838-5012
email: cityofbeacon@cityofbeacon.org

Application Fee: \$15.00. *This is a non-refundable application processing fee that **MUST** be paid at the time of submitting an application.*

Licence Type:

Quarterly License (\$50/ Quarter)
Yearly License (\$150/ Calendar Year)

Quarterly License; choose quarter(s)

ending March 31st
ending June 30th
ending September 30th
ending December 31st

Date of Application

Applicant 1 *(if more than one applicant, please list each separately)*

Name

Residence/ Address

City, State, Zip

Date of Birth

Phone Number

Alternate Phone

Email

Applicant 2 *(for more than two applicants, please include information separately)*

Name

Residence/ Address

City, State, Zip

Date of Birth

Phone Number

Alternate Phone

Email

If applicant is a **STOCK CORPORATION**, state the following:

Corporation Name

Name(s) of Directors or
other Governing Body

Address(s) of Directors or
other Governing Body

Location of applicant's
principal place of
business

Name and residence of all person(s) selling, soliciting, seeking donations, conducting polls: *(if there are more than two people, please attach separately)*

Person 1

Name

Address

Phone

Person 2

Name

Address

Phone

Has the applicant(s) ever been convicted of any felony for which registration as a sex offender is required?

No

Yes

If **YES**, state the nature of the felony, the court where convicted, and the date of the penalty assessed or sentence imposed. *If yes applies to more than one person, list names and explanations for each.*

State, **in detail**, the particular business, trade or occupation for which the license is required.

State the location or locality where the business will be carried on:

State the manner or means of conveyance in which the business shall be conducted

If OTHER, please explain

Motor Vehicle

Pushcart

Sidewalk Stand

House-to-House

Other:

Provide the proposed days during which business will be conducted:

Provide the times during which the business will be conducted:

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

For use of Motor Vehicle:

Year

Make & Model

License Plate

I, (print name) _____ do here by certify that the above information is true and correct, and that I intend to fully comply the provisions of Chapter 129 of the Beacon City Code, and all other City ordinances and laws.

Signature of Applicant

Sworn to before me this _____ day of _____, 20_____

Signature, Notary Public

For Office Use Only: