

**TOWN OF BETHLEHEM**

445 Delaware Avenue  
Delmar, NY 12054  
(518) 439-4955 ext 1183

Permit #: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

**APPLICATION FOR PEDDLER PERMIT  
FEE: \$75.00/PERSON; \$100/VEHICLE**

**Applicant Info**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

County: \_\_\_\_\_ State & Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Citizen of the United States: Yes \_\_\_ No \_\_\_ Student: Yes \_\_\_ No \_\_\_

Driver's License: Yes \_\_\_ No \_\_\_ If yes, State & License #: \_\_\_\_\_

Convicted of felony: Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Vehicle of Applicant or Supervisor:**

Year & Make: \_\_\_\_\_

Model: \_\_\_\_\_ Registration No.: \_\_\_\_\_

State: \_\_\_\_\_ Owner: \_\_\_\_\_

**Person, group, firm or corporation, etc. represented by applicant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**Supervisor:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public, State of New York

*Please submit this Application and Payment to the Town Clerk's Office. Make checks payable to "Town of Bethlehem."*