



TOWN OF ISLIP
655 Main St., Islip, NY 11751

LINDA D. VAVRICKA
Town Clerk & Registrar

Preliminary Application for Stationary Peddlers License

Name: _____ Social Security #: _____

Home Address: _____ Telephone #: _____

Business Address: _____ Bus. Telephone #: _____

Date of Birth: _____ Color of Eyes: _____ Color of Hair: _____

Drivers License #: _____ Height: _____ Weight: _____

United States Citizen: ☐ Yes ☐ No If No, do you have documentation of you Alien Registration? ☐ Yes ☐ No

Nature of Business and Goods to be sold: _____

Will you sell any products from a farm or orchard? _____ If yes, are they produced or grown by you? _____

Site Location (1st choice): _____ Address: _____ Tax Map: _____

Owner of Site Name: _____ Telephone _____ Attach original letter of authorization from owner of site.

For how long do you desire to peddle in Islip? _____

Are you going to use a vehicle in connection with your peddling? _____

If yes, answer these questions:

Make of Vehicle: _____	License Plate #: _____	Year: _____
Insurance Policy #: _____	Health Permit #: _____	Expiration Date: _____
Veterans Permit #: _____	Unladen Weight: _____	Laden Weight: _____

- Please obtain a copy of the site plan for each choice showing the location of the site, adjacent roadways, ingress, egress, parking and the location on the site where vehicle is to be parked.
- Please obtain a written consent letter from each property owner of each location at which the applicant proposes to be located.
- APPLICATIONS WILL NOT BE ACCEPTED UNLESS COMPLETE. IF APPROVED, APPLICANT WILL HAVE THIRTY DAYS TO SUBMIT A FINAL APPLICATION.
- Applicant can apply for one location in three different hamlets. However, approval will be made for only one site.

Hamlet of 1st Choice: _____

Hamlet of 2nd Choice: _____

Hamlet of 3rd Choice: _____