



TOWN OF WATERFORD
TOWN CLERK
65 BROAD STREET * WATERFORD, NY 12188
518-235-8282
APPLICATION FOR PERMIT TO SOLICIT

NAME: _____ DATE: _____

ADDRESS: _____

PHONE: _____

1. ARE YOU A CITIZEN OF THE UNITED STATES _____
2. NAME, ADDRESS AND PHONE NUMBER OF BUSINESS: _____

3. TYPE OF BUSINESS (IN DETAIL) _____

4. HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR _____
IF YES, GIVE DETAILS _____

5. NUMBER OF VEHICLES AND KIND WITH PLATE NUMBER OF EACH VEHICLE:

6. TYPE OF GOODS AND SERVICES TO BE RENDERED _____

7. DISTRIBUTION METHOD _____
8. NAME, ADDRESS OF PERSON UPON WHOM A LEGAL NOTICE MAY BE SERVED

9. NAME AND ADDRESS OF PRINCIPAL OFFICERS _____

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

SIGNATURE: _____

SIGNED AND SWORN TO BEFORE ME THIS
____ DAY OF _____ 20____

Notary Public _____ (seal/stamp)
State of New York