



TOWN OF ISLIP

655 Main St., Islip NY 11751

OLGA H. MURRAY
Town Clerk & Registrar

Application for Mobile Peddlers License

Applicant must submit fees in Certified Check, Money Order or Cash

Mobile Peddler fee \$150.00/ Helper's License fee \$50.00

ALL APPLICATION AND FINGERPRINT FEES ARE NON-REFUNDABLE

Name: _____ Telephone #: _____

Home Address: _____

Business Address: _____ Bus. Telephone#: _____

Date of Birth: _____ Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____

Driver's License #: _____ Expiration: _____ SSN #: _____

United States Citizen: Yes No If no, do you have documentation of your Alien Registration Yes No

Nature of Goods to be sold; please specify in the space provided.

Hard Ice Cream (prepackaged)

If hard ice cream is to be sold, you will need to show:

PREPACKAGED ICE CREAM - SAFETY CERTIFICATE Submitted Need Update

Soft Ice Cream

If soft ice cream is to be sold, you will need to show:

Food Handling Certificate

New York State Sales Tax ID # _____

Suffolk County Department of Health Certificate

SOFT ICE CREAM - BOARD OF HEALTH CERTIFICATE PERMIT # _____

Make of Vehicle: _____ License Plate #: _____

Year: _____ Expiration Date of Insurance Policy: _____

Provide four photographs (2" by 2") of yourself taken within sixty (60) days of this application.

Give the names, addresses and phone numbers of at least two (2) reliable property owners of Suffolk County, New York who will certify as to your good character and business responsibility:

1) _____

2) _____

Have you ever been convicted of any crime, or violation of any municipal ordinance? Yes No

If yes, give details, including dates, places of conviction, nature of offense charged, and the punishment or penalty assessed therefore.

Date	Place of Conviction	Nature of Offense	Sentence Imposed

I HEREBY SWEAR THAT THE ANSWERS CONTAINED HEREIN AND THE INFORMATION SUPPLIED WITH THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

I UNDERSTAND THAT FALSE STATEMENTS MADE HEREIN SUPPLIED WITH THIS APPLICATION ARE PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW.

FALSE STATEMENTS MADE HEREIN SHALL BE GROUNDS FOR DENIAL OF LICENSE

SIGNATURE OF APPLICANT

SWORN BEFORE ME THIS _____ DAY OF _____ 20____

NOTARY PUBLIC

****FOR OFFICE USE ONLY****

License #: _____ Date Issued: _____ Receipt #: _____

License Fee: _____ Helper Fee: _____

Date Fingerprinted: _____ Fingerprint Fee: CASH ____ CHECK # _____ M/O ____

EXTRA PAGE {if needed}

***FALSE STATEMENTS MADE HEREIN SHALL BE GROUNDS FOR DENIAL OF LICENSE* (continued)**

Date	Place of Conviction	Nature of Offense	Sentence Imposed