APPLICATION FOR LICENSE OR PERMIT **VENDORS-PEDDLERS-SOLICITORS**

Town of Glenville Office of the Town Clerk 18 Glenridge Road Glenville, NY 12302

(518) 688-1200 ext. 2

NAME	DOB	LICENSE NO
(a) LEGAL ADDRESS		
		TEL. NO
(b) LOCAL ADDRESS		
		TEL. NO
Are you a United States Citizer resident or alien) in the U.S		ountry of citizenship, type of visa or status (i.e.
Name, address and telephone r	-	zation represented
Valid NYS Sales Tax Number_		
	•	on upon whom legal notice or process may be
What type of business will you b	pe conducting?	
What type of goods will be sold	?	
If a vehicle(s) is to be used, list	as follows:	
Year/Make/Model	<u>Color</u>	License Number/Issuing State
Have you ever been convicted local law?	of a crime, misdemea	nor or violation of any municipal ordinance or

(2)		<u>ITY</u>	LICENSE NUMBER	DATES IN THAT AREA
				-
Albar	ny, Schenectady ess responsibili	y or Saratoga in ity.	the State of New York who w	able property owners in the Cou ill certify as to your good characte
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