



TOWN OF GATES  
TOWN CLERK'S OFFICE  
1605 BUFFALO ROAD  
ROCHESTER, NY 14624

SOLICITOR / PEDDLER / FOOD VENDOR APPLICATION  
To be completed by *each* employee representative or solicitor

NOTICE TO APPLICANT: This application is made under oath and by signing this; you are testifying that the statements made in the application are true. Any person who makes a material misrepresentation on the application pursuant to Section 140 of the Code of the Town of Gates will have application denied.

**APPLICATION FEE IS NON-REFUNDABLE**

**Applicant Information**

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

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

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

Phone No: \_\_\_\_\_ Driver License #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Have you ever been arrested for a crime?  Yes  No

If Yes, List Any/All Felonies or Misdemeanors Charged with along with the Disposition of each such charge:

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

Will a vehicle(s) be used for soliciting?  Yes  No Multiple Vehicles  Yes

Please List for each

Make & Model: \_\_\_\_\_ State / License Plate No: \_\_\_\_\_

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

**Business / Organization Represented**

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Manager / Supervisor Name: \_\_\_\_\_

Business / Contact Phone No: \_\_\_\_\_

Length of Time Permit is required for: \_\_\_\_\_

**Description of Goods or Services to be offered:**

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

**\*\*Please attach letter of Authorization from firm you are representing.**

**ACKNOWLEDGEMENT & OATH:** I understand that I am responsible for compliance with all applicable Federal, State, and Local laws including Chapter 140 “Peddling, Soliciting and Food Vending” of the Code for the Town of Gates and agree to abide by all restrictions and conditions set forth in such law. I further acknowledge that all the submitted information is correct.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Sworn to before me this \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_ **FOR CLERK USE ONLY** \_\_\_\_\_

Date: \_\_\_\_\_

Clerk Taking Application: \_\_\_\_\_

**Application Fee:**

\$50.00 Individual  \$100.00 Organization (Cash, Check, Credit Card) \_\_\_\_\_

Check here, if organization is exempt from Solicitor’s License Fee,.

**Solicitor’s License Fee:** \$75.00 / 3 months (Cash, Check, and Credit Card) \_\_\_\_

Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Additional Months @\$25.00 / month (Cash, Check, and Credit Card)

if applicable: Yes / No

Number of months: \_\_\_\_\_ Fee: \_\_\_\_\_

Total fee: \_\_\_\_\_

**Background check** Approved  Denied

DATE: APPROVED / DENIED BY TOWN CLERK \_\_\_\_\_

Adopted: 01/04/2016