

BELLOWS FALLS VILLAGE CORPORATION  
P.O. Box 370  
Bellows Falls, Vermont 05101

APPLICATION FOR PEDDLERS, SOLICITORS, ITINERANT VENDORS, AND  
TRANSIENT MERCHANTS LICENSE

To be submitted to the Village Manager, P.O. Box 370, Bellows Falls, VT 05101, for action not less than thirty (30) days prior to the anticipated date of commencement of business. No license will be granted unless State of Vermont Permit or Certificate of Exemption has been received by the applicant prior to submission of this application.

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

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

Telephone: \_\_\_\_\_

Local Address & Telephone Number: \_\_\_\_\_

Brief description of business and goods to be sold: \_\_\_\_\_

\_\_\_\_\_

If employed, Name, Address & Telephone Number of Employer: \_\_\_\_\_

\_\_\_\_\_

Operating Location: \_\_\_\_\_

Have you attached letter of permission from property owner? \_\_\_\_\_

Dates of Operation: \_\_\_\_\_

Vehicle Description: \_\_\_\_\_

License Number and State: \_\_\_\_\_

Brief description of applicant's stand or cart: \_\_\_\_\_

\_\_\_\_\_

Have you attached a photograph of stand or cart? \_\_\_\_\_

Itinerant Vendor's State License No: \_\_\_\_\_ Exemption Certification No: \_\_\_\_\_

If exempt, explain: \_\_\_\_\_

Vermont Sales and Use Tax No: \_\_\_\_\_

I have read Chapter V, Article III, Sections 1-7 of the Bellows Falls Village Ordinances, Licenses and Miscellaneous Business Regulations, and agree to abide by the requirements and regulations set down therein.

Fee: \$10.00

\_\_\_\_\_  
Name of Licensee (please print)

\_\_\_\_\_  
Signature

APPEAL PROCESS: If after ten (10) days the permit is not granted, or has been denied, you have twenty (20) days from date of application to file an appeal with the Board of Trustees of the Village of Bellows Falls.

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Village Manager Date

Waiver of Fee: Yes \_\_\_\_\_ No \_\_\_\_\_

Permission to operate on Public Property: Approved \_\_\_\_\_ Denied \_\_\_\_\_ by the Bellows Falls Village Board of Trustees.

\_\_\_\_\_  
Date

Restrictions (if any): \_\_\_\_\_

\_\_\_\_\_