

## Town of Colchester, Connecticut

Application for Peddlers, Vendors and Solicitors License

Refer to Colchester Ordinance 713 - Street Vendors

Last Name of Applicant  Address of Applicant				First Name & Middle Initial				
						Telephone		
Date of Birth	Place of Birth	Height	Weight	Race	Color Hair	Color Eyes	Type of Application Business Individual	
Company or Organization Name				Address				
Telephone		Nature of Product or Service to be provided:						
State your purpo	ose for obtaining thi	is license:						
Vehicle Informat	don	Location to be used under this license: (Must have written permission of land owner)						
Year	Make	Days and hours of operation:						
Color	License No:	Comments:						
Have you been an convicted on other vehicle charges?	er than motor	If yes, explain:						
Will you sell foo or beverages?	d If yes, Date, Tim	e, Results and Signs	iture of Code En	forcement Official)				
Date or Application		Signature of Applicant						
Date Received:	Received by:	Received by:			Information Verified by Picture ID.			
License No:	Date Issued:	Date Expires:	Fee:	Approved by:	J	8.7		
Comments:								

Any license issued as a result of this application is not transferable to anyother person or entity and must be displayed at the site approved above during the operation of the approved activity. Any license issued under this application is valid only at the location shown on this application.