

Township of Hillsborough

COUNTY OF SOMERSET THE PETER J. BIONDI BUILDING 379 SOUTH BRANCH ROAD HILLSBOROUGH, NJ 08844 (908) 369-4313 www.hillsborough-nj.org

A <u>license is required</u> for any person wishing to hawk, sell, or solicit door-to-door, street-to-street, or place-to-place business in Hillsborough Township.

Applications for Peddler/Solicitor Licenses are available for downloading at the Hillsborough Township website and must be completed in full, with the required attachments. A background check is also required as part of the application process. Please allow at least two (2) months for the background check.

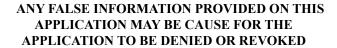
Please have the following items with you when applying for a Peddler/Solicitor license:

| Notarized application completed in full |
|-------------------------------------------------------------------------------|
| Hillsborough Township Police Department Information Release completed in full |
| Two passport-type photographs taken within the past 60 days |
| A copy of the applicant's valid driver's license or government-issued ID |
| A check for \$20 per applicant |

Important:

- Applications MUST be completed in full. Applications with missing, misleading, or vague information will be declined.
- Applications must be notarized.
- Please allow at least two months for Hillsborough Township Police Department to complete a background check.
- Anyone operating a motor vehicle must have a valid driver's license
- Once ready, Peddler's licenses will be mailed to the peddler/solicitor's place of employment.
- Local business references <u>cannot</u> come from the applicant's employer or co-workers.
- The peddler/solicitor <u>may not</u> conduct door-to-door business until <u>after</u> a license is issued by Hillsborough Township.
- Any false information provided on the application may be cause for application to be denied or revoked.

APPLICATION FOR A PEDDLER'S LICENSE WITHIN HILLSBOROUGH TOWNSHIP





| Name and Description of Applicant | APPLICATION DATE: / / Name of Applicant: (Please Print) |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Description: Age Weight Hair Color Eye Color Sex Place of Birth: Date of Birth: Social Security #: Driver License # and State Issued: |
| Applicant's Information | Permanent Home Address: Email Address: Telephone # Home: Cell Phone: Local Address (If different): Name, Address, Telephone # of nearest relative: |
| Description of merchandise or services to be sold or nature of business | |

| Employer Information | Name of Employer: Phone #: Address: Email Address: Local headquarters if different from main address: | |
|-----------------------------|-----------------------------------------------------------------------------------------------------------|--|
| | | |
| Licensing Information | Period License Desired: From / / to / / | |
| | Vehicle to be used: Make Model Year | |
| | Additional Vehicles (Make, Model, Year) | |
| | Driver's License and state of issuance of all other drivers of these vehicles: | |
| | | |
| Manufacturer Information | Manufacturer of articles to be sold: | |
| | Will delivery be made from car: Yes No | |
| | If no, then how will merchandise be delivered? | |
| | Two <u>local</u> business references located in Somerset County: | |
| References | Name Address | |
| | Email Address Phone Number | |

| References | Name | Address | | |
|------------------------------|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | Email Address | Phone Number | | |
| | Have you ever been convicted Ordinance? Yes No | of a crime, misdemeanor or violation of any Municipal | | |
| Background Information | If Yes, state briefly the nature o | f offense and penalties imposed: | | |
| Photographs (2): Showing | head & shoulders, taken within 6 | 0 days. Must be 2" x 2". Do not attach permanently. | | |
| Sworn to before me: | | | | |
| Date | | Signature of Applicant | | |
| | | Applicant please note: 1. Each person soliciting must have a valid permit. | | |
| Notary Public (Affix Seal an | d Expiration Date of Notary) | Anyone operating a motor vehicle must have a valid driver's license. A separate peddler's license is required for additional products. Please allow six to eight weeks for processing of this application. Unless otherwise requested, the peddler's license will be mailed to employer. Fee: \$20.00 per application. | | |

| Name:Address: | | | | | | | | | | |
|-----------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------|--|--|--|-----------------|-----------------------------------------|---------------|---|
| | | | | | | | Canvassers: | | | |
| | | | | | | | Name | Address | Date of Birth | · |
| | | | | | | | | rate listing if more space is required) | | |
| | | | | | | | (Attach a Sepai | ate listing if more space is required; | | |
| Provide a brief | description of the method to be used | I to conduct canvassing: | | | | | | | | |
| Time and date | canvassing will commence: | | | | | | | | | |
| Prefered time | and dates: | | | | | | | | | |
| Alternate time | and dates: | | | | | | | | | |
| Ending/termin | ation date for canvassing: | | | | | | | | | |
| | Applicant please note the following: | | | | | | | | | |
| | | esent or in any way imply endorsement | by the | | | | | | | |
| | Township of Hillsborough or any of its | • | | | | | | | | |
| | | ce to the Hillsborough Township Police invassers will be working on which day | | | | | | | | |
| | | with descriptions and license plate num | | | | | | | | |
| | of vehicles being used. | | | | | | | | | |
| | As applicant, I ensure that each canva character and will conduct himself/he | sser involved in this canvassing is of go | od | | | | | | | |
| | | cated to all canvassers, that no canvass | ing will | | | | | | | |
| | | ere "no soliciting" or like signs have be | en | | | | | | | |
| | posted. 5. As applicant, it is understood that any | misleading or false information provid | ed on | | | | | | | |
| | | and will result in violation of this ordin | | | | | | | | |
| | and revocation of the permit. | | | | | | | | | |
| | | shall wear an identification tag/badge ontain their name and the name of the | | | | | | | | |
| | 5 , | distance of at least 10 feet away (tag/ | | | | | | | | |
| Sworn to befo | re me: | | | | | | | | | |
| | | | | | | | | | | |
| Date | | | | | | | | | | |
| | | | | | | | | | | |

Organization of entity for whom canvassing is being conducted:

Notary Public (Affix seal and expiration date of notary)

HILLSBOROUGH TOWNSHIP POLICE DEPARTMENT RELEASE INFORMATION

| I, am mal | king application for a Peddler's/Raffle/Carnival license. As |
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| a result, an investigation is being conduct | ed to determine my eligibility. I do hereby authorize a information concerning myself, whether the said records |
| association or institution having control of a to me, to furnish to the said Municipality, O Public Safety any such information, forma data, and to permit the said Municipality, | firm, company, corporation, governmental agency, court, any documents, records, and other information pertaining county Prosecutor's Office and/or Department of Law and or informal, pending or closed, or any other pertinent County Prosecutor's Office and/or Department of Public and make copies of such documents, records, and other |
| Department of Law and Public Safety, the information from any and all liability of every or collecting of such documents, records, as | the said Municipality, County Prosecutor's Office and the eir representatives and any other person so furnishing ry nature and kind arising out of the furnishing, inspection and any other information or the investigation made by the Office and/or the Department of Law and Public Safety. |
| A photocopy of this authorization and releathe said photocopy does not contain an ori | se form will be as valid as an original thereof, even though ginal writing of my signature. |
| i have read and fully understand the conte | nts of the "Authorization and Release". |
| Full Name | |
| Signature (include maiden name) | |
| Address | |
| Phone Number | |
| Date of Birth | |
| Social Security Number | |
| Driver's License Number | |