

**CITY OF DOVER APPLICATION OF PEDDLERS/VENDORS LICENSE**

**Dover City Clerk  
Municipal Building – 288 Central Avenue  
Dover, NH 03820-4169**

**(603) 516-6018**

PLEASE PRINT

Name of Applicant: \_\_\_\_\_ Telephone No. \_\_\_\_\_

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

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

Business Address: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Name and Address of Owner other than Applicant: \_\_\_\_\_

\_\_\_\_\_ Telephone No. \_\_\_\_\_

Location for Sale of Goods: \_\_\_\_\_

Product (s) to be Sold: \_\_\_\_\_

Are they produced or grown by applicant: \_\_\_\_\_

Requested Effective Date of Operation: From: \_\_\_\_\_ To: \_\_\_\_\_

Days and Hours of Operation: \_\_\_\_\_

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**THE FOLLOWING MUST BE SUBMITTED WITH APPLICATION**

\*Description & Photograph of stand or motor vehicle being used: Yes \_\_\_\_\_ No \_\_\_\_\_

\*Certificate of Insurance: Yes \_\_\_\_\_ No \_\_\_\_\_

\*Motor vehicle registration and license plate number: \_\_\_\_\_

\*Certificate of Inspection for equipment to be used: (Food/Beverage Vendors) Yes \_\_\_\_\_ No \_\_\_\_\_

\*Copy of State License issued to applicant pursuant to provisions of R.S.A. 320:8 or signed statement claiming exemption therefrom: Yes \_\_\_\_\_ No \_\_\_\_\_

\*Positive I.D.

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:

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

**ANNUAL LICENSES EXPIRE AT MIDNIGHT ON MAY 31st AND MAY BE REVOKED FOR JUST CAUSES**

Licensing Board: \_\_\_\_\_ Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

**LICENSE FEES**

\_\_\_\_\_ \$10.00 per week to peddle other than from a motor vehicle, not to exceed 12 weeks in duration (payable upon application)

\_\_\_\_\_ Peddler - \$200.00 per year per vehicle to peddle from a motor vehicle (payable upon application)

\_\_\_\_\_ Vendor - \$200.00 per year to vend from a fixed location (payable upon application)

\_\_\_\_\_ - \$200.00 per year per vehicle to vend from a motor vehicle (payable upon application)

\_\_\_\_\_ Exemption from fees pursuant to 133-7, participating only in a "street fair"

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The applicant must comply with the requirements of City Code Chapter 166 relative to metered parking and marked lines

The applicant must comply with the requirements of City Code Chapter 131 regarding loud or unreasonable noise

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Signature/date

## RELEASE OF INFORMATION

I hereby, authorize the Dover Police Department to release any and all records (including criminal records) in my name. I understand that the information so released may prove unfavorable to me. I agree to hold any source of information blameless for any error in reporting this information. I release all persons whomsoever from any liability arising out of, or resulting from the release of this information. I am willing that a Photostat of this authorization be accepted with the same authority as the original.

PRINTED NAME OF APPLICANT: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SSN: \_\_\_\_\_ SEX: \_\_\_\_\_

MAIDEN NAME IF APPLICABLE: \_\_\_\_\_

PRESENT ADDRESS OF APPLICANT: \_\_\_\_\_

PREVIOUS ADDRESS OF APPLICANT: \_\_\_\_\_

WITNESS TO SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### WARNING

It is a crime to knowingly provide false information on this application form. Persons doing so will be investigated and prosecuted by the Dover Police Department. All criminal and motor vehicle summonses, arrests, or convictions must be acknowledged as requested except where they have been annulled. Annulled records are those whereby you have FORMALLY petitioned the court to do so, and the court has granted that petition. If you have any questions as to what should be included in this section of the application form, please call or contact the Dover Police Department for further information.

Effective 6/1/2001