

TOWN OF HARWINTON

HARWINTON, CONNECTICUT 06791

Tele: (860) 485-9051 • Fax: (860) 485-0051

Application for Peddlers' License and Permit

(See and must comply with ordinance #146)

Applicant's Name:			5		
Age:	Height:	Weight:	Hair Color:	Eye Color:	
Driver's	License #:		License Plate #:		
Home Address:			Phone Number:		
Employer:			_ Supervisor's Nam	e:	
Employer Address:			Business Phone #:		
Description of Mer	rchandise:				
Have you ever bee	n convicted:	If yes, what,	and where:		
Period you intend to solicit:			State Permit #:(must include copy)		
Applicant Signature:			Date:		
Internal Use Only:					
Application is here	eby approved and	permission is gr	anted this day	of,	
			ek #:		
First Selectman		Tov	vn Clerk	Resident State Trooper	