APPLICATION #	Scrie
DATE RECEIVED:	STHOCKET MA
DATE APPROVED:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
LICENSE DURATION: JAN. 1 ST - DEC. 31 ST	
ANNUAL FEE: \$15.00	ORATED MARCO
LICENSE EXPIRATION: <u>12/31/20</u>	
LOCATION: PEDDLER'S HILL/	
TOWN OF MIL	LLINOCKET
APPLICATION FOR A F	PEDDLER'S LICENSE
APPLICANTS NAME:	
APPLICANTS ADDRESS:	
MAILING ADDRESS IF DIFFERENT:	
APPLICANTS PHONE #:	
TAX IDENTIFCATION NUMBER (ONLY ONE IS NEEDE	ED)
APPLICANTS STATE SALES TAX #:	
APPLICANTS FEDERAL TAX #:	
APPLICANTS SOCIAL SECURITY #:	
PRODUCTS TO BE OFFERED UNDER THIS LICE	NSE:
() FRESH FRUITS & VEGETABLES	() FRESH & FROZEN MEATS
() FISH, LOBSTERS & OTHER OCEAN PRODUCTS	() CIDER, SYRUP, HONEY, JAMS& JELLIES
() FIDDLEHEADS & WILD BERRIES	() FRESH EGGS & DAIRY PRODUCTS
() BAKED & CANNED GOODS	() HERBS & ORGANIC PRODUCTS
() SEEDLINGS & FLOWERS	() WREATHS & CHRISTMAS TREES
() HOMEMADE FUNITURE & CABINETWORK	() HOMEMADE ARTS/CRAFTS
() MORIJE PUSH-CARTS TUNCH WAGON: SERVING	FRIED GRILLED OR FRESH SANDWHICHES NON-

ALCOHOLIC BEVERAGES AND INCIDENTALS

AFFIRMATIN AND SIGNATURE:

I, the undersigned applicant for this license, hereby certify that the information I
have given in this application is true and complete to the best of my knowledge. I
further realize that any license granted to me will be based solely on the information I
have given in this application and that any inaccurate information may lead to
enforcement action against me including the revocation of any license granted. I
further certify that I have read and understand the provisions of Chapter 97 o the Town
code, a copy of which has been provided to me. I understand that any license granted
pursuant to this application is subject to the terms and conditions of Chapter 97.

I understand that I am responsible for the appropriate compliance with all other applicable federal, state, and local laws ordinances or regulations.

SIGNATURE:	 		
DATE:			