



Town of Newton

Lorraine A. Read, RMC/CMR
Municipal Clerk/Registrar

Telephone: 973-383-3521 ext. 232
Fax: 973-300-1208

APPLICATION FOR SOLICITOR'S, CANVASSERS, PEDDLERS AND HAWKERS

Applicant: (Print or Type)

Full Name: _____
Last First M. Maiden Name

Social Security No.: _____ Date of Birth: _____

Permanent Address: _____

Place of Employment: _____

Address: _____

Telephone: (Work) _____ (Home) _____

Eye Color: _____ Hair Color _____ Height _____ Weight _____

Marks & Scars: _____

Place of Birth: _____ Alien/Nicknames _____

New Jersey Drivers License No.: _____ N.J. Reg. _____

Out of State Drivers License No.: _____ State: _____

Out of State Registration No. _____ State: _____

Alien Registration: Type _____ Alien No.: _____
(Must show card for duplicating purposes)

Using current address fist, list all addresses you have resided at in the past ten (10) years.

From/Mon/Yr To/Mon/Yr. Address Street Apt. City State Zip
(Physical Locations)

1. _____
2. _____
3. _____
4. _____

If additional space is needed, use reverse side

Spouse's Name: _____ DOB _____ SS# _____

Have you ever been arrested or convicted of DWI in New Jersey, or any other state? Yes _____ No _____

If Yes, Where and When: _____

Have you ever been convicted or have cases pending for any offense/crime in New Jersey or any other state? If yes, where and when?

Two references not related to applicant:

NAME

ADDRESS

PHONE#

1. _____

2. _____

Soliciting Information:

Name & Address of Firm: _____

Where product manufactured? _____

Proposed method of delivery? _____

Where are goods now located? _____

Length of time permit is desired? _____

Names of New Jersey Municipalities in which you have solicited in the past 3 months:

Describe briefly the nature of your business and the goods sold: _____

Description of Vehicle:

Make of Vehicle

Year

Body Type

Color

License Plate

State

Have you ever had a solicitor's permit in Newton, New Jersey? _____ Yes _____ No

If a prior permit was issued, give date of issuance: _____

INSTRUCTIONS:

Two (2) recent photographs, passport style (approx. 2” x 2”), showing head and shoulders of applicant.

Both of above must accompany application. Otherwise, permit application will not be issued/investigated.

MUST provide a photocopy of SALES TAX CERTIFICATE, as required by Senate Bill No. 1165, (Ch. 274, Laws of N.J. 1993) signed into law November 24, 1993.

References must be reliable, reputable persons who will certify to your character and business respectability or other available evidence as to good character and business respectability of applicant and his employer.

Application fee will be determined Chapter XXI of the Revised General Ordinance of the Town of Newton.

PERMIT WILL NOT BE GRANTED UNTIL THE POLICE DEPARTMENT HAS COMPLETED ANY INVESTIGATION DEEMED ADVISABLE.

NO PERMIT ISSUED FOR A PERIOD LONGER THAN ONE (1) YEAR FROM THE DATE OF ISSUANCE.

NO soliciting or canvassing activities shall be conducted before 8:00 a.m. nor after 5:00 p.m. nor on Sundays or Holidays.

POLICE DEPARTMENT ACTION:

Approved ()

Disapproved ()

Reasons (if disapproved) _____

DATE: _____ PERMIT NO.: _____ EXPIRATION DATE: _____

Police Chief / Designee

FEES ARE AS FOLLOWS:

Solicitor’s & Canvassers

- 1. License fee, per day \$ 50.00
- 2. License fee, per week \$100.00
- 3. License fee, per month \$200.00
- 4. License fee, per year \$300.00

**(CHECK PAYABLE TO:
“TOWN OF NEWTON”)**

Peddlers & Hawkers

- 1. License Fee Traveling Food Vendor \$350.00
- 2. License Fee (Stationary) \$300.00
- 3. Food Handlers \$ 0.00

The information furnished by me is true and correct to the best of my knowledge and belief that I further understand that any false or fictitious information I submit is grounds for automatic rejection of this application/permit being sought. I further understand that submitting false information to the Newton Police Department may lead to criminal complaints against me.

Knowing the above, I hereby authorize the Town of Newton Police Department or their agents to make any inquiries, questions, or interrogatories concerning the undersigned to any other agencies, officials, firms, corporations, associations, organizations, or other persons as deemed necessary to complete their background investigation of me.

I hereby release and exonerate every official, and every other person, firm, officer, corporation, association, organization, or institution which shall comply in good faith with the authorization and request made herein from any and all liability of every nature and kind growing out of or in anyway pertaining to the furnishing or inspection of such documents, records, and other information written or spoken for this investigation made by the Newton Police Department.

Date: _____

Signature of Applicant

Witness by Notary Public:

State of New Jersey, County of _____ on this _____ day of _____, 20 _____ personally appeared before me the said _____, to me know to be the individual described.

Signature of Officer _____

Official Title _____

SEAL