



TOWN OF THOMASTON

THOMASTON POLICE DEPARTMENT



Jeffrey J. Madden
Chief of Police

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APPLICATION FORM FOR PEDDLERS/HAWKERS, CANVASSERS/SOLICITORS AND VENDORS LICENSE

Date of Application: _____

Date(s) of Business / Activity: _____ to _____

Name of Applicant: _____ Phone: _____

Address: _____

Date of Birth: _____ Sex: _____ Age: _____ Height: _____ Eyes: _____ Race: _____ Hair: _____

Business / Agency Name: _____

Address: _____ Phone: _____

Business / Agency Activity Description: _____

Business Owner (If Different from Applicant): _____

Vehicle Make: _____ Model: _____ Color: _____ Reg # & State: _____

State Tax Permit No: _____ Federal Tax ID No.: _____ EIN No: _____

Zoning Approval: _____ Health Dept. Approval: _____

Insurance Certificate / Bond (\$500.00 Min. Coverage) Application Fee (\$60.00)

I declare, under the penalties of False Statement, that the above information is true and correct.

Date: _____ Applicant Signature: _____

State of: _____ County of: _____ Subscribed and Sworn Date: _____

Notary Public Name: _____ Signature: _____

For Official Use Only: Fee Paid: Y / N Insurance Provided: Y / N Background Check: Y / N

*Serving Our Community Since 1929
Pride – Integrity – Honor*