HOCKERS, PEDDLERS & SOLICITORS LICENSE APPLICATION

Town of Stratham *Incorporated 1716*10 Bunker Hill Ave. • Stratham, NH 03885

| APPLICANT INFORMATION | | | | | | | | | | | |
|---|----------------|-------|-----------|----------|-------|----------|----------------|------------------|------|------|--|
| Applicant Name: | | | Phone #: | | | F | Email: | | | | |
| Address: | | | City: | | | s | State: | | Zi | ip: | |
| Date of Birth: | Social Sec. #: | | | Driv | | | er's Lic #: | | | | |
| LICENSE INFORMATION | | | | | | | | | | | |
| Company/Organization Name: | | | | | | | Taxpayer ID #: | | | | |
| Address: | | | City | City: | | | State: | | Zip: | | |
| Area of Stratham where soliciting will take place: | | | | | | | | | | | |
| | | | | | | | | | | | |
| Description of product, service and method or type of solicitation: | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| PERSONS WORKING WITH/FOR APPLICANT: | | | | | | | | | | | |
| NAME: | | | | DOB: | | | | SSN: | | | |
| NAME: | | | | DOB: | | | | SSN: | | | |
| NAME: | | | | DOB: | | | | SSN: | | | |
| NAME: | | | | DOB: | | | | SSN: | | | |
| DESCRIPTION OF MOTOR VEHICLES TO BE USED: | | | | | | | | | | | |
| MAKE: | MODEL: | YEAR: | YEAR: COL | | | PLATE #: | | STA | ATE: | | |
| MAKE: | MODEL: | YEAR: | YEAR: CO | | OR: | PLAT | PLATE #: | | STA | ATE: | |
| MAKE: | MODEL: | YEAR: | OR: | PLATE #: | | | STA | STATE: | | | |
| PROVIDE DESCRIPTIONS OF ADDITIONAL NAMES AND/OR VEHICLES ON A SEPARATE SHEET | | | | | | | | | | | |
| MISCELLANEOUS INFORMATION (if applicable): | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| I hereby swear that the above information is true to the best of my knowledge. Providing false information is contrary to NH RSA 641:3 Unsworn Falsification. | | | | | | | | | | | |
| Signature: | | | | | Date: | | | ate: | | | |
| APPROVED DENIED Reason for denial: | | | | | | | | | | | |
| Chief of Police Signature: | | | | | Date: | | P | Permit # Issued: | | | |