

**TOWN OF SWEDEN
PEDDLING - SOLICITING APPLICATION**

BUSINESS or ORGANIZATION: _____

PERSON(s) IN CHARGE: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____

LICENSE TO COVER DATES FROM: _____ TO: _____

TIME OF DAY FROM: _____ TO: _____

LOCATION: (specify target areas) _____

● Products to be sold or for which orders are to be solicited: _____

● Items / publications to be distributed: _____

● Nature of other solicitation: _____

Vehicle to be used (if any): Year _____ Make _____ Model _____

State of Registration _____ Plate # _____

Include copies of photo identification for all individuals peddling/soliciting.

Mobile Food Units:

Must attach State and County Health Department compliance certificate(s).

SIGNATURE OF APPLICANT

Office Use Only:

Date of Application: _____ Fee Submitted: _____

Date of Approval / Denial: _____

PERMIT NO. _____ Clerk Signature _____

Expiration Date: _____

Peddling & Soliciting Permit Fee Schedule

Effective Date

One (1) to seven (7) days	\$100
Eight (8) days to six (6) months	\$250
Six (6) months to maximum of one (1) year	\$500