

TOWN OF WILLING

1431 State Route 19, Wellsville, New York. 14895

Phone (585) 593-3210

Application for Town of Willing Solicitation/Peddling Permit

(Mail or return to Town Clerk at Address above)

Name: _____

Address: _____

Name of Company or Person: _____

Address: _____

Age: _____

Date of Birth: _____

Citizenship (individuals) _____

Name, Address and Citizenship of all Officers if Corporation/ Business:

Prior Convictions/Violations of any law or ordinance:

I _____ shall comply with all local, county, state and federal requirements.

(Print Name)

Signature of applicant

Date

Received by _____

Date: _____