



Town of Portland, Connecticut ❖ [www.portlandct.org](http://www.portlandct.org)

APPLICATION FOR:

Peddlers ❖ Hawkers ❖ Solicitors ❖ Canvassers ❖ Vendor Permits

(Ordinance: Chapter 11, Article I & III)

\*No business is to be conducted in the Town of Portland until application is approved.\*

\*\*If selling food, a Food Permit must be issued in conjunction with a Vending Permit\*\*

PRINT CLEARLY or TYPE

**I. COMPANY / ORGANIZATION INFORMATION**

Check One:  Business  Charity  Non-Profit  Other \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone# \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP

CONNECTICUT SALES TAX NUMBER (C.G.S. 12-409): \_\_\_\_\_

copy of Certificate of Insurance submitted:  Yes  No

Describe Nature of Business: \_\_\_\_\_

Describe Type of Goods to be sold: \_\_\_\_\_

Time-span of Permit Wanted:  1-Year  6-months  One-month  Other \_\_\_\_\_

Manner of Dispensing Product:  Vehicle  Push Cart  Door to Door  Other \_\_\_\_\_

List location(s):  Town-wide  Other: \_\_\_\_\_

**II. DESCRIPTION OF VEHICLE TO BE USED (where applicable):**

Make:	Year:	License Plate #:
Model:	Color:	Registration # and State:

**III. APPLICANT PERSONAL INFORMATION (for additional staff see page 2)**

Name:	Address, City, State, Zip:		
Telephone #:	Alternate Phone #:		
Place of Birth:	Date of Birth:		
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Race:	Height:	Weight:
Hair Color:	Eye Color:	Social Security No.	

**IV. CERTIFICATION**

1) Have you ever been convicted for committing any crime other than motor vehicle charges?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2) Have you ever been refused a permit for this type of business?	<input type="checkbox"/> Yes <input type="checkbox"/> No

(If you answer "Yes" to either of the above questions, please explain in detail on the reverse side of this form)

I declare, under the penalties of False Statement (C.G.S. Section 53a-157b), that the answers to the above are true and correct. By signing this form I give the Town of Portland permission to fingerprint me, conduct a record check based on the above information, and to take my photograph. I agree to display the permit prominently in my place of business or carry same upon my person if engaged in vending from place to place. I acknowledge that I have reviewed the Town Ordinances and State Statutes which apply to the proposed activity, agree to comply with rules and regulations contained therein. I further acknowledge that failure to so comply or if I have falsified, misrepresented or omitted any item in this application, will result in revocation or denial of the permit sought.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Question #1: \_\_\_\_\_

Question #2: \_\_\_\_\_

If multiple people are soliciting, please complete the following information...WRITE CLEARLY

V. ADDITIONAL STAFF:			
Name:		Address, City, State, Zip:	
Place of Birth:		Date of Birth:	
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Race:	Height:	Weight:
Hair Color:	Eye Color:	Social Security No.	
1) Have you ever been convicted for committing any crime other than motor vehicle charges? <input type="checkbox"/> YES <input type="checkbox"/> NO		2) Have you ever been refused a permit for this type of business? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Name:		Address, City, State, Zip:	
Place of Birth:		Date of Birth:	
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Race:	Height:	Weight:
Hair Color:	Eye Color:	Social Security No.	
1) Have you ever been convicted for committing any crime other than motor vehicle charges? <input type="checkbox"/> YES <input type="checkbox"/> NO		2) Have you ever been refused a permit for this type of business? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Name:		Address, City, State, Zip:	
Place of Birth:		Date of Birth:	
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Race:	Height:	Weight:
Hair Color:	Eye Color:	Social Security No.	
1) Have you ever been convicted for committing any crime other than motor vehicle charges? <input type="checkbox"/> YES <input type="checkbox"/> NO		2) Have you ever been refused a permit for this type of business? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Name:		Address, City, State, Zip:	
Place of Birth:		Date of Birth:	
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Race:	Height:	Weight:
Hair Color:	Eye Color:	Social Security No.	
1) Have you ever been convicted for committing any crime other than motor vehicle charges? <input type="checkbox"/> YES <input type="checkbox"/> NO		2) Have you ever been refused a permit for this type of business? <input type="checkbox"/> YES <input type="checkbox"/> NO	

**DO NOT WRITE BELOW - FOR OFFICE USE ONLY!**

PROOF OF HEALTH DEPARTMENT APPROVAL:		<input type="checkbox"/> Not applicable
DATE:	<i>Signature of Chatham Health District Sanitarian indicates compliance</i>	

PROOF OF ZONING APPROVAL:		<input type="checkbox"/> Not applicable
DATE:	ZEO check here if location is exempt <input type="checkbox"/>	<i>Signature of Zoning Enforcement Officer indicates compliance</i>

APPLICATION STATUS:		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	First Selectman/Chief of Police	Date:

## **Fee Schedule for Canvassing, Hawkers, Peddling, Solicitors, Vending**

<b>Duration</b>	<b>Fee to be paid</b>
One Year	\$120
Six Months	\$60
One Month or less	\$15

**One-time fee exemption for Non-Profits and Veterans** upon documentation\*\*

*Effective Date of Fee Change: November 20, 2019*

*\*\*IRS letter granting exemption & 501(c) certificate; honorable discharge papers - application of activities still required*

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### **Rules of Conduct:**

No canvassing, hawking, peddling, soliciting, vending and such shall be allowed until the local permit has been approved and the fee has been paid (payment either by check or money order made payable to "Town of Portland" or by exact cash payment).

The permit is valid for the indicated period only and will require renewal, if needed, after expiration.

If canvassing, a list typed or printed legibly consisting of the canvasser's names, a description of the vehicle being used (make, model, year & color), and streets designated to canvass on must be faxed daily to the First Selectmen's Office at 860-342-6714 and the Portland Police Department at 860-342-6781.

Municipal buildings, including schools, are restricted zones of which shall not be solicited.