

TOWN OF SOUTHAMPTON
Office of the Town Clerk – Sundy A. Schermeyer

116 Hampton Road, Southampton, NY 11968
Telephone (631) 287-5740 Fax (631) 287-5606
www.southamptontownny.gov/TOWNCLERK

Town Clerk Annex Telephone (631) 723-2712 Fax (631) 723-3080



PEDDLING AND SOLICITING
REQUIREMENTS FOR VEHICLE LICENSE:

License Fee per vehicle: \$350.00

Fees are non-refundable and due when the application is submitted.

Payable via: cash, credit card, check or money order payable to the “Town of Southampton”.

Expires: December 31st, Midnight

DOCUMENTS TO BE SUBMITTED WITH APPLICATION:

* It is the responsibility of the Business Owner to supply renewal documents.

- **COPY OF YOUR NEW YORK STATE DRIVER’S LICENSE**
- **COPY OF VALID NEW YORK STATE VEHICLE REGISTRATION**
- **AUTO LIABILITY INSURANCE CERTIFICATE**
 - Must include the name, local address and telephone number of the insurance agent and the business owner’s license number.
- **SUFFOLK COUNTY CERTIFICATE OF HEALTH**
- **BUSINESS REGISTRATION:**
 - Sole Proprietorship – copy of the Business Certificate from Suffolk County reflecting D/B/A for business name applied for
 - Corporation/LLC - Include a copy of INC/LLC/DBA or Article of Organization with Receipt from the State.

***Veterans: proof of Suffolk County Peddler’s License is required to waive application fees.**

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If applicable, please provide a current certificate from any of the following:

- _____ Suffolk County Department of Health
- _____ Suffolk County Department of Weights and Measures

Corporation or Partnership name, if applicable:

Name: _____ Title: _____

Address: _____

Phone #: _____

VEHICLE INFORMATION:

Name of Owner of Vehicle: _____

Address (Mailing): _____

VIN # _____ Plate #: _____

Year _____ Model _____ Make _____ State _____

NOTARY PUBLIC

I have answered the foregoing questions to the best of my knowledge and belief and swear that said answers are true and accurate. Any changes with regard to information regarding name, residence, business location and/or any change in the telephone number of the person designated for service of legal process shall be reported in writing to the Town Clerk within seven (7) days of occurrence. All other changes shall be reported to the Town Clerk within thirty (30) days of occurrence.

Signature _____ Date _____

A FALSE STATEMENT MADE HEREIN IS PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK

Sworn to before me this

_____ day of _____ 20____

Office Use Only

License Picked up: _____

License Mailed on: _____