



Borough of Bergenfield

198 N. Washington Avenue • Bergenfield, NJ 07621
201-387-4055 • www.bergenfield.com

Approval Date: _____

Denial Date: _____

License #: _____

Application for Peddler's License

\$100 for each person peddling, hawking or vending for each consecutive thirty-day period
\$100 for lunch wagon and ice cream truck for a one-year period

TYPE A: PEDDLER BY FOOT The undersigned hereby makes application for a Peddler's License under the provisions of
TYPE B: PEDDLER BY TRUCK Chapter 227 of the Borough Code and submits the following facts in support thereof:

Name:		Date:	
Address:		City:	State: ZIP:
Date of Birth:	Place of Birth:	Age:	
Social Security Number:			
Phone Number:		Email:	
Driver's License:	D.L. State:	D.L. Expiration Date:	

References:

Name	Address	Phone #
1. _____	_____	_____
2. _____	_____	_____

Are you a veteran or an exempt fireman: Yes No

Have you ever applied for a license here before: Yes No If Yes, what type: _____

Have you ever been arrested? Yes No If Yes, please complete the following:

Date of Arrest	Charge	Town	Disposition
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Identification Required with Photo:

Driver's License #: _____ Passport: _____

Other: _____

Purpose of Permit (articles sold): _____

Name of Business: _____	
Business Address: _____	
Phone #: _____	Local Manager: _____

"Peddler Truck Type" – Type of Vehicle:			
Make:	Model:	Year:	Plate #:
Vehicle Registration #:		Registration State:	

License Fee	Quantity
Peddler: _____	_____
Lunch Truck: _____	_____
Ice Cream Truck: _____	_____
Total Amount Due: _____	_____

X _____
Applicant Signature

**For Official Use Only*

Approved by _____ Date: _____

Board of Health: _____

Fire Official: _____

Investigated by
Police Department: _____ Y _____ N _____

This form must be signed and approved by the Borough Clerk prior to the issuance of a license.

Fee Paid \$: _____ Cash/Check#: _____

Date of Approval: _____ Date License Issued: _____ Denial Date: _____

License #: _____ Expiration Date: _____

Borough of Bergenfield
Police Department
198 North Washington Avenue
Bergenfield, New Jersey
07621



Phone
201-387-4000
Fax
201-387-0141

PEDDLER/SOLICITOR PERMIT AUTHORIZATION TO RELEASE INFORMATION

To Whom it May Concern;

I hereby authorize any police officer of the Bergenfield Police Department, bearing this release, or copy of this release, to check any criminal history, driving record and driving status, and any provided references, based on my name, date of birth and social security number provided on the Application for **Peddler Permit** for the Borough of Bergenfield, Bergen County, New Jersey. I understand a check will be made in the following areas:

- NCIC/SCIC Wanted Persons
- Automated Complaint System (ACS) for any criminal or local ordinance warrants
- Automated Traffic System (ATS) for any traffic warrants
- NJ Motor Vehicle Commission and/or NLETS (Out of State Driver Records)
- *InfoShare* (Arrest Record System for Bergen County Law Enforcement).
- Local in-house computer check (CAD) – Bergenfield Police Dept.
- Local records check in city/municipality of residence

This release shall expire one year from the date of signing unless revoked sooner by the undersigned.

NAME: _____ DATE of BIRTH _____
(Printed)

(Signature) S.S. # _____

(Address) (Telephone)

(Date)
Sworn and subscribed before me this _____ day of _____, 20 ____

Notary Public, State of New Jersey

My commission expiration date _____

*If applicant is a Juvenile, parent/guardian must complete below **in the presence** of a BPD Detective.*

Name (Printed)

Signature