



TOWN OF DURHAM

PERMIT APPLICATION STREET VENDING, PEDDLING, DOOR-TO-DOOR SOLICITING, AND OTHER COMMERCIAL ACTIVITIES

Type of Permit Requested (Please Check one)	Permit Fee
Door-to-Door _____	_____ \$50/initial fee _____ \$100/week
Street Vendor _____	_____ \$50/initial fee _____ \$100/week
Itinerant Vendor _____	_____ \$50/initial fee _____ \$100/week
Nonprofit Organ. _____	N/A N/A
Other _____	

SECTION I: GENERAL INFORMATION

Date of Application _____

Name of Organization & Representative _____

Local Address: _____

Address of Organ. and/or Rep. _____

Telephone Number of Organ. and/or Rep. (_____) _____

Driver's License Number & State _____

Insurance Carrier _____

Address of Carrier _____

Policy No. & Expiration Date _____

Date(s) of Activity _____

Time(s) of Activity _____

Type of Activity _____

Area where Activity will occur _____

SECTION II: DOOR-TO-DOOR SOLICITATIONS

Complete Section I above. Complete the following section ONLY if the permit is to conduct door-to-door solicitations. **Background investigations on each solicitor will be conducted by the Durham Police Department. The Town of Durham reserves the right to deny any applicant a permit based upon the results of the criminal background check.**

Name(s) and Date(s) of Birth of Solicitors: _____

Type of Identification Solicitors will be wearing: _____

Vehicle and Plate Number(s) Used During Solicitation: _____

SECTION III: ATTACHMENTS

Persons applying for permits to conduct door-to-door, itinerant, or street vending operations must attach to the application a copy of each solicitor’s driver’s license, vehicle registration, and a State of New Hampshire Hawker and Peddler License.

Nonprofit and charitable organizations must attach proof of “nonprofit” status if other than a church or school.

FOR OFFICIAL USE ONLY

Special Conditions (if required): _____

Approved / Disapproved

_____	_____	_____	_____
Durham Police Chief	Date		
_____	_____	_____	_____
Durham Public Works Director	Date		
_____	_____	_____	_____
Durham Zoning Officer	Date		
_____	_____	_____	_____
Durham Fire Chief (if required)	Date		
_____	_____	_____	_____
Town Administrator	Date		

Reason for Disapproval:

Amt. of Fee Paid: _____
Means of Payment: Check # _____ Cash _____
Date of Payment: _____
Received by: _____

NOTE: Applicants are responsible for ensuring cleanup of their area (i.e. trash pick up). Failure to comply with the procedures contained in Ordinance #93-04 may result in immediate revocation of this permit.