TOWN OF GREENBURGH

TOWN CLERK'S OFFICE

177 Hillside Avenue Greenburgh, NY 10607

MAIN: (914) 989 – 1500 | FAX: (914) 993 – 1626

TownClerk@GreenburghNY.com

INSTRUCTIONS FOR SOLICTOR'S LICENSE

1) No individual may engage in the business of soliciting in the Town of Greenburgh until he/she has a current solicitor's license issued and in hand by the Town Clerk's office. The license is not transferrable and must be carried with the applicant at all times.

2) The license expires yearly on December 31st of the year the license was issued.

3) The applicant must submit a completed application, to include three passport size photographs, full face, bareheaded, on a white background, taken within 30 days of filing the application.

4) For food vendors, the applicant will need to provide a copy of their County Health Department Permit with the application.

5) For first time applicants that are honorably discharged members of the armed forces of the United States, the applicant will need to provide a copy of his/her discharge papers so that the $100 Solicitor's application fee can be waived. **(note, fingerprinting fee will not be waived.)**

6) Applicant's signature must be notarized.

7) Return completed application, documents and the non-refundable application fee of $100 to the Town Clerk's Office. The applicant will receive a receipt when the application is accepted by the Town Clerk's Office.

8) Each applicant must reapply each year with the Town Clerk's Office.

9) Then, each applicant must have fingerprints taken, please contact L 1 Enrollment at (877) 472 – 6915 to make an appointment. The following non-refundable fee must be paid at that time to L 1 Enrollment to the Fingerprinting Department. **The ORI # for the Town of Greenburgh is NY0595300**.

10) Before a license is approved, the applicant will be investigated by a Greenburgh Police Department Representative. The applicant must provide a schedule of the route and stops. As per the Town of Greenburgh Solicitor's Ordinance, no stop is to be longer than 15 minutes.

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SOLICITOR'S LICENSE APPLICATION

The following must be provided by any person desiring solicitor's license from the Town Clerk of Greenburgh:

1) The name, date, and state of incorporation: (Attach a copy of the Articles of Incorporation)

_____

2) The current tax status of the organization: (i.e. whether tax exempt, not-for profit, etc).

_____

3) Proof of registration with the Department of State Office of Charities Registration and/or the Attorney General Charities Bureau.

_____

4) Attach Sample Literature

5) Provide the dates and times soliciting is to take place:

_____

6) A current list of the names, addresses, dates of birth and social security numbers of each solicitor. (Attach to Application)

7) Proof of an identification card for each solicitor including the name, photograph and name of organization. (Attach Copies to Application)

8) Each applicant shall submit two sets of fingerprints to the Chief of Police or their designated representative in conformity with the Fingerprints Law of the Town
(ORI # for Town of Greenburgh is NY0595300, Fingerprints must be in digital form)

9) $100 Non-Refundable fee for application

I have read the Greenburgh attached Laws contained in Chapter 390 of the Code of the Town of Greenburgh including the prohibited acts and restrictions on peddlers, solicitors, and registered canvassers and I understand that my permission to solicit may be revoked upon violation of these conditions.

_____ _____

Signature of Applicant Relationship to Organization

Sworn to before me,
On this_____ day of _____, 20_____

_____

Notary Public

Town of Greenburgh
Application for Solicitor's License

OFFICE USE ONLY		
Application Received:_____	Receipt # _____	Amount Received_____
License Approved On: _____	License Denied:_____	Reason: _____

There is a one hundred dollar ($100.00) **non-refundable** fee to process this Application. False replies to any of the questions herein, under the law, constitutes perjury; detection of such falsity will result in refusal of license, or, if granted, in revocation of same.

Please print and complete all information.

Personal Information

Name: _____
Last First Middle

Address: _____
Street Address City State Zip

Number of years at this address: _____ Home Phone: _____Cell Phone_____

Date of Birth: _____ Social Security #: _____
Month Day Year

Are you an honorably discharged member of the U. S. armed forces? Yes ____ No _____
If yes, please submit a copy of your discharge papers.

Date of Photo _____

Three full face photos: 2"x2"
Passport type photos (not machine)
Bareheaded on white background
Taken within the last 30 days

Exemptions

Provided that such person has completed the application for a license to canvas, and has met all other requirements as set forth in this local law, there shall be no fee other than the fingerprint processing charge for an honorably discharged member of the armed forces of the United States, who is the holder of a license issued pursuant to Section 32 of the General Business Law of the State of New York.

Town of Greenburgh
Application for Solictor's License

Have you ever received a Canvasser's license from the Town of Greenburgh? _____

If yes, what years? _____ Last year fingerprinted _____

Were your previous Canvasser's licenses ever revoked or suspended? Yes_____ No _____
If yes, give particulars below:

_____

_____

Criminal Background

Were you ever convicted of any crime other than a traffic violation? Yes _____ No _____

If yes, how many times? _____ State facts below, if necessary, attach additional sheets of paper)

Date	Jurisdiction	Under What Name	Conviction	Sentence Imposed

Motor Vehicle Information

Make _____ Model _____ Color _____ Year _____

Vin # _____ Reg. Type _____ Reg. Exp. Date_____

NY Motorist ID#: _____ Expiration Date: _____

Owner of Vehicle

Name: _____
Last First Middle

Address: _____
Street Address City State Zip

Town of Greenburgh
Application for Solictor's License

Business Information

Business Name _____

Describe the type of services, goods, wares and/or merchandise you wish to sell or solicit orders for:

_____

Westchester County Dept. of Health Permit Number (for food vendors) _____

Name of corporation, firm, association, club, partnership or any other organization represented by the applicant _____

If soliciting for a corporation

Date Incorporated _____ State Incorporated _____ No. of Officers in Corp. _____

For each officer of the Corporation, give the following information (attached additional sheets of papers if necessary): ***provide manager information***

Name: _____
Last First Middle

Address: _____
Street Address City State Zip

Number of years at this address: _____ ***Business phone #*** _____

I swear or affirm that all the foregoing answers to the foregoing questions and statements are true and correct to the best of my knowledge.

_____
Applicant's Signature

STATE OF NEW YORK
COUNTY OF _____

_____ being duly sworn, deposes and says that he/she is the individual making the foregoing application for a Canvasser's license; that the answers to the foregoing questions and other statements contained herein are true of his/her own knowledge.

Sworn to before me this _____day of _____, _____

_____
Signature of Notary Public or Commissioner of Deeds