

Application Number _____

Date Received _____

\$10 Fee _____

Town of Urbana

PO Box 186, Hammondsport, New York 14840
Town Clerk (607) 569-3743 Codes Department (607) 569-3707



Vending Permit Application

Applicant
Name _____
Street _____
City _____
State/Zip _____
Telephone _____

Company
Name _____
Street _____
City _____
State/Zip _____
Telephone _____

The Town of Urbana Code § 76 requires a Vending Permit to be applied for and issued prior to vending and/or soliciting within the Town of Urbana. This permit must be carried at all times and displayed on demand.

Photo ID:

Each transient merchant permit shall have a term of one week. For the purposes of this Article, a "week" is defined as that period beginning at 9:00 a.m. on Monday and ending at 6:00 p.m. the following Sunday or any portion thereof.

Unit License Plate Number: _____ State: _____ Expires: _____

Dates: From _____ To: _____

Address/Location: _____

Signature and Verification

I hereby certify that the information contained on the application is accurate and factual:

Signature of Applicant: _____ Date: _____

Signature of Code Officer: _____ Date: _____