Village of Hammondsport
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Hammondsport, NY 14840

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SOLICITING PERMIT APPLICATION

Date:_____

Applicant:
Name:_____ _____
Address:_____
Phone:_____

BUSINESS:
Name: _____
Address: _____
Phone: _____

Brief description of goods or services to be provided: _____
_____

Location where applicant intends to do business:_____
_____

Description of vehicle to be utilized and copy of the registration:_____
_____

Requested term of this permit:
Date:_____
Date:_____
Date:_____
Date:_____
Date:_____

NOTE: Fee: $10.00 per day

Approved:_____
Date:_____ Permit #_____