

HAWKERS & PEDDLERS LICENSE APPLICATION

TOWN OF BOOTHBAY HARBOR

11 Howard Street  
Boothbay Harbor, Maine 04538-1010  
(207) 633-3671

The Town of Boothbay Harbor has found it necessary to restrict, and in general prohibit the use of public ways for commercial use in order to maintain public welfare and safety. This also includes the transient and temporary sales of products or services within the community.

The Codes of The Town of Boothbay Harbor require that unless exempt, any or all transient or temporary businesses who wish to operate within the limits of Boothbay Harbor, first obtain a Hawkers and Peddlers License from the Municipal Officers. A copy of said ordinance/code is on the reverse of this application.

All Hawkers and Peddlers Licenses issued by the Town of Boothbay Harbor, expire at mid-night, (2400 hrs) December 31, of the issuing year. All licenses are issued to the owner and business as one, and are not transferable. Should either of the two change, a new license is required.

This application is not complete until all questions have a response, and any request for additional information has been satisfied.

Business Name: \_\_\_\_\_ Tele # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town/City: \_\_\_\_\_

Any other name(s) used by the applicant within the last five years: \_\_\_\_\_

Business owner's name: \_\_\_\_\_ Tele #: \_\_\_\_\_  
( if corporation, give name of Corp., address and Maine agent )

Owners address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Owner's legal residence: \_\_\_\_\_

Business/Person's ID #: \_\_\_\_\_ (If Person) DOB: \_\_\_\_\_

If Corp. Name of President: \_\_\_\_\_ Vice Pres: \_\_\_\_\_

Name of Manager: \_\_\_\_\_ Emergency Tele # \_\_\_\_\_

Type of Business: \_\_\_\_\_ Sales Tax #: \_\_\_\_\_

Location/Area you wish to operate from/in: \_\_\_\_\_

Date(s) of operation: (from) \_\_\_\_\_ (to) \_\_\_\_\_

Other ordinances or laws may pertain to this application. A determination on this application cannot be made until all other permissions, permits or licenses are in hand.

MORAL CHARACTER

A License may only be issued upon a finding of Good Moral Character, please provide the following information in order to accelerate the process.

Has the Corporation, Partnership, owner, person or any participating employee ever been convicted under any criminal statute in any state or municipal jurisdiction for offences of theft, fraudulent or deceptive business practices, misrepresentation of sales or adulterated merchandise: \_\_\_\_\_ If yes, please explain on page 3 of this application.

IN ADDITION: I/We hereby authorize the release of any criminal history or record of such information to the Chief of Police and Municipal Officials of the Town of Boothbay Harbor. It is understood that this information will become part of this application. I/We hereby certify that all statements made in this application are true. I/WE agree and understand that any misstatement or omission of material fact herein will result in refusal of any or all license(s) requested, or revocation of any or all license(s) issued from or by this application.

Position of applicant in relation to this application: \_\_\_\_\_

Signature of Applicant(s): \_\_\_\_\_ Date: \_\_\_\_\_

Additional information may be required of the applicant.

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Official Use Only

Date Received: \_\_\_\_\_ Date of Hearing: \_\_\_\_\_

Investigating Officer: \_\_\_\_\_ Date: \_\_\_\_\_  
Print or type

Investigative Officer's comments/remarks: \_\_\_\_\_  
\_\_\_\_\_

Investigating Officer's Signature & Date

Licensing Board comments/remarks: \_\_\_\_\_  
\_\_\_\_\_

Date Fee Paid: \_\_\_\_\_ Rec. # \_\_\_\_\_

Date Issued: \_\_\_\_\_ Date Denied: \_\_\_\_\_

\_\_\_\_\_  
Chairman, Board of Selectmen      Date

PLEASE USE OR ATTACH TO THIS SHEET  
COMMENTS, REMARKS OR ADDITIONAL INFORMATION