

VILLAGE OF VALLEY STREAM
123 So. Central Avenue
Valley Stream, New York 11580

Permit _____
Date _____
Decal # _____

TELEPHONE – [516-592-5105](tel:516-592-5105)/vsclrk2@vsvny.org (Fax 825-8316) Licenses Expire 1/31 of Each Year
Bus. Hours: 8:00 a.m. – 4:00 p.m.

APPLICATION FOR PEDDLERS AND SOLICITORS LICENSE
CHAPTER 60 OF THE CODE OF THE VILLAGE OF VALEY STREAM

Name _____
(Last) (First)
Address _____
(Home) (Business)
Phone _____
(Home) (Business)
Date _____ Age _____ Color of Eyes _____ Height _____ Weight _____
Social Security No. _____ Business Ident. No. _____
Nature of Business _____
Description of Goods or Property to be peddled or solicited _____

Religious and Charitable Organizations must also be complete – Part B.

____ Provide **three (3) two by two (2x2) photographs of applicant**, taken not more than sixty (60) days prior to date of filing of application, showing head & shoulders of applicant in a clear and distinguishable manner.

- ____ **Fee of \$100 for first truck and \$85 for each additional truck.**
- ____ **Copy of current registration of vehicles to be licensed.**
- ____ **A current Health Dept. inspection certificate.**
- ____ **If not a citizen of the United States must submit proof of Naturalization.**
- ____ **Ins. Requirements with Signed Hold Harmless Clause.**
- ____ **Copy of Certificate of General Liability Insurance & Additional Insured Endorsement.**
- ____ **Copy of Workers' Compensation form (C-105.2).**
- ____ **Copy of Disability Insurance form (DB120.1).**
- ____ **OR**
- ____ **Form CE-200 in place of W/C & Disability Insurance.**
- ____ **Clerk's initials**

TRAFFIC VIOLATIONS	<u>Yes</u>	<u>No</u>
Have you ever had a driver's license suspended or revoked?	___	___
Have you received any summons within the last three years? (Except for Traffic Violations)	___	___
Are there any criminal charges pending against you at this time?	___	___
Have you ever been found guilty of any violation of law?	___	___
Do you have a license or certificate to practice a trade or profession?	___	___

If Yes: No. _____ Type _____ Valid From _____ to _____ Issued by _____

I hereby agree to conduct my operation in compliance with the laws of the inc. Village of Valley Stream and New York State.

Date _____ Signature of Applicant _____
Date: _____ Approved: _____ Village Clerk

VILLAGE OF VALLEY STREAM
123 So. Central Avenue
Valley Stream, New York 11580

Have you served in the Armed Forces? Yes _____ No _____

Dates of Entry into active service _____ Release _____ Discharge _____

CITIZENSHIP

	<u>Yes</u>	<u>No</u>
I am a citizen of the United States by Birth	___	___
I am a citizen of the United States by Naturalization	___	___

I am not a citizen of the United States
Must submit proof of Naturalization. Attach copy of proof submitted.

EMPLOYER

Self Employed _____ Company _____ Corporation _____

Address of Employer _____

Title of Officer upon whom process or other legal notices may be served

PART B

RELIGIOUS AND CHARITABLE ORGANIZATIONS:

1. Are you a Religious or Charitable Corporation or Organization excepted under the laws of the State of New York, or other State or Country.

Yes _____ No _____

If yes, give date when organization formed. Date _____

Give State or Country that organization was formed _____

2. State whether organization is recognized by the Internal Revenue as a religious or charitable organization for the purpose of all contributions made thereto as being tax deductible.

If yes, please give date Internal Revenue Service so recognized religious or charitable organization. Date _____

VEHICLE DESCRIPTION

Make _____ Type _____ Year _____ Color _____

Owner's Name _____ License Plate _____

Owner's Address _____

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Insurance Requirements For Independent Contractors/Sub-Contractors
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The independent contractor shall maintain at a minimum the following insurance giving evidence of same to Inc. Village of Valley Stream on the form of **Certificates of Insurance, copies of the General Liability, Declaration Page and copy of the Additional Insured Endorsement, providing 30 days notice of cancellation, non-renewal or material change.** New York State licensed carrier is preferred; any non-licensed carriers will be accepted at the Municipalities discretion. The insurance carrier must have an A.M. Best Rating of at least A- IX. All subcontractors must adhere to the same insurance requirements.

I. Workers Compensation and NYS Disability

Coverage	Statutory
Extensions	Voluntary Compensation; All States Coverage Employers Liability - Unlimited

II. Commercial General Liability

Coverage and Limits	Occurrence - 1988 ISO or equivalent
	General Aggregate \$2,000,000
	Products & Completed Operations \$2,000,000
	Personal & Advertising Injury \$1,000,000
	Per Occurrence Limit \$1,000,000
	Fire Damage \$ 50,000
	Medical Expense \$ 5,000

Additional Insured	Inc. Village of Valley Stream, all elected and appointed officials, employees and volunteers using ISO Form CG2026 or equivalent
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Extension – Mandatory	Aggregate Limits to apply per project. Full Contractual Liability
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Extension – If possible	Endorsement showing that this policy is considered primary and non-contributory . Waiver of Subrogation in favor of the additional insured.
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III. Automobile Insurance

Limit	\$1,000,000. Combined Single Limit – Owned, Hired & Non-owned Vehicles
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If possible:

Additional Insured	Inc. Village of Valley Stream, all elected and appointed officials, employees and volunteers.
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IV.	<u>Umbrella Liability - Suggested</u>	
	Coverage	Umbrella Form, or Excess Follow Form
	Suggested Limit	\$2,000,000.
	Additional Insured	Inc. Village of Valley Stream, all elected and appointed officials, employees and volunteers.

INC. VILLAGE OF VALLEY STREAM

To Vendors/Contractors

Please be advised that all insurance requirements must be current and be on file in the Office of the Village Clerk.

CERTIFICATE OF GENERAL LIABILITY & ADDITIONAL INSURED ENDORSEMENT WORDING:

The Description should read:

The Inc. Village of Valley Stream, all elected and appointed officials, employees and volunteers are included as Additional Insureds.

The Certificate Holder should read:

**Inc. Village of Valley Stream
123 So. Central Avenue
Valley Stream, NY 11580**

INDEMNIFICATION/HOLD HARMLESS AGREEMENT

The Vendor/Contractor shall indemnify and hold harmless the Inc. Village of Valley Stream, its officers, employees, and/or agents from any and all liability, damage, loss, claims, demands and actions of any nature whatsoever, for any reason whatsoever, foreseeable or unforeseeable, which arises out of or is connected with, or is claimed to arise out of to be connected with any undertaking, product, goods, merchandise, products, services sold and/or work supplied, furnished or performed by the Vendor/Contractor or its agents, liability, damages, loss, claims, attorneys and adjusting fees, demands and actions on account of personal injury, death or property loss to the Inc. village of Valley Stream its officers, employees, agents or to any other persons, third parties, or property, but shall not include claims resulting from the gross negligence or willful misconduct of the Inc. Village of Valley Stream. This indemnity and hold harmless is intended to be as broad as is permitted by law and to include claims of every kind and nature – for tort, under contract, for strict liability or other liability without fault, under statute, rule, regulation or order; and otherwise.

IN WITNESS WHEREOF, the undersigned has duly executed this Agreement the ____ day of _____, 202__.

Name of Firm

Address

Contractor's Signature

(Please Print Name and Title)

Witness:

Signature

Date

Print Name