

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

Permit _____
Date _____
Decal # _____

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

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 _____

Incorporated Village of Valley Stream

Insurance and Indemnification Requirements for Independent Contractors/Sub-Contractors

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The INDEPENDENT CONTRACTOR/VENDOR shall maintain at a minimum the following insurance giving evidence of same to **INCORPORATED VILLAGE OF VALLEY STREAM** on the form of **Certificates of Insurance, Acord Form 855 – New York Construction Certificate of Liability Insurance Addendum, copy of the Additional Insured Endorsements, providing 30 days’ notice of cancellation, non-renewal or material change. C105.1 form or State Insurance Fund Certificate for Workers Compensation and DB120.1 Certificate for NYS Disability.** New York State licensed admitted carrier is preferred; any non-licensed/non-admitted carriers will be accepted at the Municipalities discretion. The insurance carrier must have an A.M. Best Rating of at least A- IX. The insurance coverage limits set forth in Schedule below are minimum coverage requirements, not limitations of liability. All subcontractors must adhere to the same insurance and indemnification requirements.

Certificate Holder for all policies: Incorporated Village of Valley Stream

123 S. Central Avenue
Valley Stream, NY 11580

Description Box to read:

Incorporated Village of Valley Stream, all elected and appointed officials, employees and volunteers of the Village are included as additional insureds per the General Liability including Contractual Liability, Products and Completed Operations, Automobile Liability and Excess Liability. Insurance Coverage is to be primary and non-contributory to any insurance carried by any additional insured. Waiver of Subrogation is included on the Workers Compensation and General Liability in favor of the Additional Insureds.

I. Workers Compensation

Coverage	Statutory
Extensions	Voluntary Compensation; All States Coverage Employers Liability – Unlimited Waiver of Subrogation in favor of the Incorporated Village of Valley Stream

II. New York State Disability and Paid Family Leave

Coverage	Statutory New York State Benefits
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III. 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
	Damage to Premises Rented To You \$ 50,000
	Medical Expense \$ 5,000

Additional Insured:

Incorporated Village of Valley Stream, all elected and appointed officials, employees and volunteers of the Village using ISO Form CG2026 or equivalent including products and completed operations coverage ISO Form CG2037 or equivalent. Additional Insured coverage is to be on a primary and non-contributory basis.

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III. Commercial General Liability - continued

Extensions – Mandatory

- Aggregate Limits to apply per project.
- Full Contractual Liability extending to Hold Harmless Agreement.
- Contractual Liability Insurance is afforded per the definition of “insured contract” as defined in Form CG0001 with no endorsements that amend or restrict the definition of “insured contract”.
- The general liability is to be primary and non-contributory to any insurance carried by any additional insured.
- The general liability must not include any exclusion, limitation or restriction pertaining to interior or exterior work height; “action over” type claims; or “injury to employee or subcontractor” exclusions, nor any exclusions for Claims that fall within the Purview of New York Labor Law Sections 200, 240 &241.
- Waiver of Subrogation in favor of all additional insureds.
- Coverage for the services rendered for the municipality, including, but not limited to removal, replacement enclosure, encapsulation and/or disposal of asbestos, or any other hazardous material, along with any related pollution events, including coverage for third party liability claims for bodily injury, property damage and clean-up costs, if applicable.

Pollution Liability

If contract involves environmentally regulated substances or hazardous material exposure(s) and/or the disposal of waste or other hazardous substance from the worksite, the contractor shall maintain Contractor’s Pollution Liability including Pollution Legal Liability insurance in the amount of at least \$5,000,000. per occurrence for 3rd party liability and clean-up. This coverage is to remain in effect for a minimum of (5) five years following the completion of work. If written on a claims made basis, the retroactive date must pre-date the inception of the contract or agreement.

IV. Automobile Insurance

Limit

\$1,000,000. Combined Single Limit

Additional Insured

Incorporated Village of Valley Stream, all elected and appointed officials, employees and volunteers on a primary and non-contributory basis.

The automobile liability is to be primary and non-contributory to any insurance carried by any additional insured.

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V. **Umbrella Liability - Suggested**

Coverage	Umbrella Form or Excess Follow Form of primary general liability including contractual liability and auto liability
Limit	\$2,000,000.
Additional Insured	Incorporated Village of Valley Stream , all elected and appointed officials, employees and volunteers on a primary and non-contributory basis.

INDEMNIFICATION/HOLD HARMLESS AGREEMENT

The INDEPENDENT CONTRACTOR/VENDOR shall indemnify, hold harmless and defend the **INCORPORATED 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 INDEPENDENT CONTRACTOR/VENDOR or its subcontractors and/or agents, for liability, damages, loss, claims, attorneys and adjusting fees, demands and actions on account of personal injury, death or property loss to the **Incorporated 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 **Incorporated 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.

The indemnification provided by this Agreement shall be a continuing right to indemnification and shall survive the expiration or termination of this Agreement.

IN WITNESS WHEREOF, the undersigned has duly executed this Agreement the ___ day of _____, 20__.

Witness

INDEPENDENT CONTRACTOR/VENDOR

Signature

Address

Date

Signature

Print Name

(Please Print Name and Title)