

TOWN OF WARRENSBURG

DO NOT WRITE IN THIS SPACE	
LICENSE NO.	_____
EVENT	_____
DATE	_____
FEE PAID \$	_____

A Fee of \$20.00 is required with this application
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Office Of The Town Clerk

Emerson Memorial Town Hall
3797 Main Street
Warrensburg, New York 12885

APPLICATION FOR INDIVIDUAL PARTICIPANT PERMIT (IPP)

ANSWERS TO ALL QUESTIONS MUST BE ACCURATE AND COMPLETE

CHECK BOX TO INDICATE TYPE OF OWNERSHIP Corporation Co-partnership Individual Owner

Name of Business _____ N.Y.S. SALES TAX NUMBER: _____

Business Address Street _____

Town or Village _____ State _____ Zip _____ Vendor Phone No.: _____

Trade/Assumed or Display Name _____

Name of Applicant (Last, First, Middle) _____

Home Address Street _____

Town or Village _____ State _____ Zip _____ Phone No.: _____

Date of Birth: _____ Sex: M F Height: _____ Weight(lbs.): _____

Eye Color: _____ Hair Color: _____ Citizen of U.S.A.: Yes No

Type of Business Trade: _____

Owner of Land: _____ Address: _____

Location: _____, Warrensburg, NY Tax Parcel #: _____

ALL EMPLOYEES of A Individual Participant who deal with the public and have authority to estimate, negotiate and finalize all contractual agreements must be listed.

NAME	RESIDENCE ADDRESS	DESCRIPTION OF DUTIES

INSURANCE AND SALES TAX INFORMATION

A Certificate of Insurance is required issued not more than 30 days prior to the event. The Town of Warrensburg, 3797 Main St. Warrensburg, NY 12885 must be shown as certificate holder. The Certificate must name the event for which it is issued and show the dates of the event. It must identify the type of goods or services the permit holder is offering for sale, and the location occupied by the vendor. The Certificate must show coverage for Liability, Workers Compensation and NY Disability (if required by the NYS Workers Compensation Board), and Auto Liability.

VEHICLES USED BY VENDOR

Make	Model	Year	License Plate #

YOU ARE REQUIRED TO NOTIFY THIS OFFICE IMMEDIATELY OF ANY CHANGE(S) IN THE INFORMATION SUPPLIED BY YOU ON THIS APPLICATION.
NOTE: False statements made herein are punishable by a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

State of New York
County of Warren SS::

Sworn to before me this _____ day of _____ 20____

X _____

Applicant Signature

NOTARY PUBLIC

IF NOTARIZED OUTSIDE THE STATE OF NY MUST HAVE ANNEXED HERETO A COUNTY CLERKS AUTHENTICATING CERTIFICATE
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