Application for Transient Vendor License – Hawkers/Peddlers/Vendors (Part A)
(Application has two parts: Part A – Police Background Check and Part B – Site Plan Review by Planning Board)

Tax Map ______  Lot ______

INSTRUCTIONS TO APPLICANT: This application is not acceptable unless all requested data is completed. Sketches of the proposed location, with specifications must accompany all applications. A non-refundable $50.00 application fee must be included with PART B of the application. Checks should be made payable to Town of Lincoln.

Lincoln Police Preliminary Review of Transient Vendor License Application (Part A)

1. Do you have a State of New Hampshire Hawkers and Peddler License as required under NH RSA 320? If yes, please attach a copy.

2. Do you have a State Itinerant Vendor License as required under NH RSA 321? If yes, please attach a copy.

3. Description of all merchandise to be sold:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
4. Anticipated Police/Fire/EMT issues:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. Hours of Operation:

________________________________________________________________________

6. Vending Dates:

________________________________________________________________________

7. I am requesting a license for door to door sales? ___ Yes  ___ No

8. Will the vending location obstruct a traveled portion of a highway or a
town right of way? ___ Yes  ___ No

Applicant’s Social Security #
(Lincoln Police Department will black out these items after Police Department approval
is granted before sending to Lincoln Planning Department for Review.)

Applicant’s Date of Birth

Primary Vendor - Applicant’s Full Name

Primary Vendor Applicant’s Signature/Date

Home Address – Street Address

Business Address – Street Address
PO Box or Mailing Address, if different

Home City, State, ZIP

Home Phone Number

Cell Phone Number, if any

E-mail address, if any

1. Is the vending operation owned by someone other than you – the applicant? If yes, the **owner of the vending business** must sign as a co-applicant and the following information is needed:

Vending Business Owner/Co-Applicant’s Name

Vending Business Owner Signature/Date

Co-Applicant’s Street Address

Business Address – PO Box or Mailing Address, if different

City, State, ZIP
2. Do you have written permission from the owner/possessor of the property, if required? If yes, please attach a copy of the written permission or the owner of the property on which the vending operation will occur must sign as a co-applicant and the following information is needed:

_________________________________________  _______________________________________
Property Owner/Co-Applicant’s Name        Property Owner/Co-Applicant’s Signature
_________________________________________  ____________
Property Owner/Co-Applicant’s Name        Date

_________________________________________
Property Owner/Co-Applicant’s Street Address

_________________________________________
Property Owner/Co-Applicant’s Mailing Address, If Different

_________________________________________
City, State, ZIP

_________________________________________  _______________________________________
Home Phone Number                           Business Phone Number
E-mail address, if any

Cell Phone Number, if any

3. Describe the Stand or Motor Vehicle (including registration data) to be used in vending business. (Attach photo if available.)

Give to: Lincoln Police Chief
Lincoln Police Department
PO Box 488
Lincoln, NH 03251
P: 603-745-2238
F: 603-745-6743
ChiefofPolice@lincolnh.org

State of New Hampshire
Grafton County
Town of Lincoln

This vendor ________________________________
has satisfied the requirements for public safety as required by the Lincoln Police Department.

____________________________________    __________________________
Police Chief            Date