Township of Hillsborough

COUNTY OF SOMERSET
THE PETER J. BIONDI BUILDING
379 SOUTH BRANCH ROAD
HILLSBOROUGH, NJ 08844
(908) 369-4313
www.hillsborough-nj.org

A license is required for any person wishing to hawk, sell, or solicit door-to-door, street-to-street, or place-to-place business in Hillsborough Township.

Applications for Peddler/Solicitor Licenses are available for downloading at the Hillsborough Township website and must be completed in full, with the required attachments. A background check is also required as part of the application process. **Please allow at least two (2) months for the background check.**

Please have the following items with you when applying for a Peddler/Solicitor license:

Notarized application completed in full
Hillsborough Township Police Department Information Release completed in full
Two passport-type photographs taken within the past 60 days
A copy of the applicant's valid driver's license or government-issued ID
A check for $20 per applicant

Important:

- Applications **MUST** be completed in full. Applications with missing, misleading, or vague information will be declined.
- Applications must be notarized.
- Please allow **at least two months** for Hillsborough Township Police Department to complete a background check.
- Anyone operating a motor vehicle must have a valid driver's license ● Once ready, Peddler's licenses will be mailed to the peddler/solicitor's place of employment.
- Local business references **cannot** come from the applicant's employer or co-workers.
- The peddler/solicitor **may not** conduct door-to-door business until **after** a license is issued by Hillsborough Township.
- **Any false information provided on the application may be cause for application to be denied or revoked.**

APPLICATION FOR A PEDDLER'S LICENSE

WITHIN HILLSBOROUGH TOWNSHIP

ANY FALSE INFORMATION PROVIDED ON THIS APPLICATION MAY BE CAUSE FOR THE APPLICATION TO BE DENIED OR REVOKED

APPLICATION DATE:_____

Applicant:

Name: _____

Age_____ Weight _____ Hair Color _____ Eye Color _____ Sex _____

Place of Birth:_____

Date of Birth: _____

Social Security#: _____

Drivers License #: _____

State of issue:_____

Permanent Home Address: _____

_____

Email:_____

Telephone: _____

Mobile / Cell #_____

Local Address (if different from above):_____

Nearest relative:

Name:_____

Address:_____

Telephone #:_____

PLEASE PRINT CLEARLY

Description of merchandise to be sold or nature of business:_____

_____

_____

_____

The place where the goods or property to be sold or offered for sale are manufactured or produced, where such goods or property is located at the time such application is filed and the proposed method of delivery:

_____

_____

_____

_____

Employer Information:

Name of Employer: _____

Phone #: _____

Address: _____

_____

Email address: _____

Local Headquarters (if different from above):_____

_____

Period License Desired: From _____ to _____

Vehicle to be used: Make_____ Model _____

Year _____ License Plate _____

Additional Vehicles (Make, Model, License Plate)_____

_____

PLEASE PRINT CLEARLY

Drivers License and State of Issuance of all other drivers of these vehicles: _____

_____

_____

_____

_____

References: In accordance with municipal code 227-5 Application requirements , two business references of BUSINESS and CHARACTER of the applicant

Reference #1

Name:_____

Address: _____

_____

Phone: _____

Email: _____

Reference #2

Name:_____

Address: _____

_____

Phone: _____

Email: _____

PLEASE PRINT CLEARLY

Applicant Background Information:

Have you ever been convicted of a crime, misdemeanor or violation of any Municipal

Ordinance? Yes_____ No _____

If yes, state briefly the nature of the offense and penalties imposed: _____

_____

_____

Photographs (2): Attach two photographs with paper clip *do not staple or glue*
Must show head and shoulders, taken within 60 days. Must be 2" x 2"

☐ I have read and understand and agree to abide by Hillsborough Township Ordinance: Ch 227Peddlers, Solicitors and Itinerant Vendors

Sworn to before me:

_____ _____

Date Signature of applicant

Applicant please note:

*Each person soliciting must have a permit
*Anyone operating a motor vehicle must have a valid driver's license
*A separate peddlers license is required for additional products
*please allow 6-8 weeks for processing
*Unless otherwise requested, the license will be mailed to the employer
*Fee: $20.00 per application

_____

Notary Public (Affix Seal and Expiration Date of Notary

PLEASE PRINT CLEARLY

Organization of entity for whom canvassing is being conducted:

Name:_____

Address:_____

_____

Telephone number:_____

Purpose for which canvassing will be conducted:_____

_____

Name, Address & phone Number of person(s) in direct charge of canvassers and canvassing:

_____

_____

_____

Canvassers: Name, address, Date of Birth, Social Security #

_____

_____

_____

_____

_____

_____

(Attach a separate sheet if more space is required)

PLEASE PRINT CLEARLY

Provide a brief description of the method to be used to conduct canvassing:_____

_____

Time and date canvassing will commence: _____

Preferred time and dates: _____

Alternate time and dates: _____

End/termination date for canvassing: _____

_____ _____

Date Signature of applicant

Sworn to before me:

_____

Date

_____

Notary Public (Affix Seal and Expiration Date of Notary

Applicant please note the following:

1. Approval of this permit does not represent or in any way imply endorsement by the Township of Hillsborough or any of its Officers or Departments.
2. Applicant must provide advanced notice to the Hillsborough Township Police Department, in writing, as to which canvassers will be working on which days and in what areas of the Township, along with descriptions and license plate numbers of vehicles being used.
3. As applicant, I ensure that each canvasser involved in this canvassing is of good character and will conduct himself/herself in a courteous manner.
4. It is understood, and will be communicated to all canvassers, that no canvassing will be conducted at dwellings or units where "no soliciting" or like signs have been posted.
5. As applicant, it is understood that any misleading or false information provided on this application is done so under oath and will result in violation of this ordinance and revocation of the permit.
6. It is understood that ALL CANVASSERS shall wear an identification tag/badge on their outermost garment, which will contain their name and the name of the organization, which is readable from a distance of at least 10 feet away (tag/badge to be provided by the organization).

HILLSBOROUGH TOWNSHIP POLICE DEPARTMENT
RELEASE OF INFORMATION

I,_____am making an application for a Peddler's/Raffle/Carnival license. As a result, an investigation is being conducted to determine my eligibility. I do hereby authorize a review and full disclosure of all records and information concerning myself, whether the said records or information is of a public, private or confidential nature.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records, and other information pertaining to me, to furnish to the said Municipality, County Prosecutor's Office and/or Department of Public Safety or their representatives to inspect and make copies of such documents, records, and other information.

I hereby release, discharge, and exonerate the said Municipali, County Prosecutor;s Office and the Department of Law and Public Safety, their representatives and any other person so furnishing information from any and all liability of every nature and kind arising out of the furnishing, inspection or collecting of such documents, records, and any other information or the investigation made by the said Municipality, County Prosecutor's Office and/or the Department of Law and Public Safety.

A photocopy of this authorization and release form will be as valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of the "Authorization and Release'

Full Name _____

_____
Signature (include maiden name)

Address_____

Phone Number_____

Date of Birth _____

Social Security Number_____

Driver's License Number_____

Fingerprinting Instructions

- Login to https://uenroll.identogo.com
- Enter Service Code: 2F1BJG
- Fill in the required information
- Enter the Contributor Case Number: PRR
- Complete the online application and scheduling system
- Use Originating Agency #(ORI): NJ0181000