



PLAINVILLE POLICE DEPARTMENT



19 NEAL COURT
PLAINVILLE, CT 06062

Phone (non-emergency): 860 747-1616 Records Division Fax: 860 747-8151

APPLICATION FOR VENDOR PERMIT

* A fee of \$25 (Cash or Certified Check) is due with the completed application.

Date: _____
Name: _____
DOB: _____ Sex: _____ S.S.#: _____

(HOME ADDRESS) (CITY) (STATE) (ZIP CODE)

Phone Number: (_____) _____ - _____

Drivers License Number: _____

Registration Plate Number: _____
(VEHICLE USED FOR BUSINESS)

Connecticut State Tax ID Number: _____

Business Name: _____ Phone: (_____) _____ - _____

Business Address: _____
(STREET) (CITY) (STATE) (ZIP CODE)

Description of Business: _____

Your signature below authorizes the Chief of Police of the Town of Plainville to conduct an investigation to determine your fitness to be issued an itinerant vendors license. A background check of your criminal and/or motor vehicle history may be inclusive in the investigation. Revocation of an issued permit may be revoked at any given time if the provided information is found to be falsified.

(APPLICANT'S SIGNATURE)

APPROVED: _____ REJECTED: _____

REASON: _____

