



Berlin Police Department

10 WILLIAM STREET
BERLIN, MARYLAND 21811

VENDOR'S APPLICATION AND CERTIFICATION FOR PEDDLING AND SOLICITING

Applicant Information:

Applicant Name _____ Date of Birth: _____

Permanent Address _____

Mailing Address _____

(if different than above)

Daytime Phone _____

Activity Information:

Name of Event _____

(if applicable)

Dates and Times _____

Description of Merchandise to be sold or Service to be performed: _____

Name & Address of Employer _____

Length of Time for which Certificate is desired _____

Description of Vehicle _____ Tag Number _____

Have you ever been convicted of any crime, misdemeanor or violation of any municipal ordinance?

YES NO

If yes, please describe nature of offense: _____

This is a two-sided form; both sides must be completed.

I, the undersigned, understand that:

- 1) If the nature of the merchandise to be sold or service to be performed involves food or drink to be prepared on site and/or prior to sale and to be sold to and/or consumed by the public, I am responsible for the following:
 - a) Application to the Worcester County Health Department
 - b) Payment of any Worcester County Health Department fees
 - c) Adherence to any Worcester County Health Department regulations regarding the provision of food or drink to the public

I further understand that Town of Berlin is in no way responsible for my adherence to the above conditions and that the Town of Berlin fee for Peddling and Solicitation is separate from and unrelated to any fee charged by the Worcester County Health Department.

- 2) The Town of Berlin reserves the right to refuse or later revoke this certification under the Code of the Town of Berlin, Chapter 75, "PEDDLING AND SOLICITING".

Signature of Applicant: _____ Date: _____

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TOWN OF BERLIN USE ONLY

_____ Approved: ____ YES ____ NO
Berlin Police Dept.

If Application denied state reason:

Fee: \$5.00 per day or \$25.00 per month to expire thirty (30) days after date of issuance

Total Paid: _____