



Hawkers and Peddlers License Application  
Allenstown Police Department  
40 Allenstown Road  
Allenstown, NH 03275  
(603) 485-9500

**Applicant Information**

Name \_\_\_\_\_ Date of Application \_\_\_\_\_  
Street \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Sex \_\_\_\_\_  
I have obtained a New Hampshire Hawklers and Peddlers License # \_\_\_\_\_  
issued on \_\_\_\_\_.

**Company Information**

Company Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
Company Phone Number \_\_\_\_\_  
Owner's Name \_\_\_\_\_ Title \_\_\_\_\_  
Owner's Home Address \_\_\_\_\_

**Employees**

*Note: All persons employed operating under this license their name, date of birth and home address must be added to the application prior to being employed under any permit issued. All additional employees should be listed on the back of this application.*

1.) Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Street \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Sex \_\_\_\_\_  
2.) Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Street \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Sex \_\_\_\_\_

3.) Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Street \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Sex \_\_\_\_\_

4.) Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Street \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Sex \_\_\_\_\_

5.) Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Street \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Sex \_\_\_\_\_

**Vehicle Information**

*Note: All additional vehicles should be listed on the back of this application.*

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License Plate No. \_\_\_\_\_  
Color \_\_\_\_\_ State \_\_\_\_\_ Registration No. \_\_\_\_\_

**Insurance Information**

Company \_\_\_\_\_  
Policy Number \_\_\_\_\_

**Merchandise Information**

Type of Merchandise \_\_\_\_\_  
Case Products from farm or orchard \_\_\_\_\_  
Produced or grown by applicant \_\_\_\_\_  
General Area in which you intend to sell \_\_\_\_\_

I have annotated below all of my motor vehicle offenses and criminal convictions and that of all employees that are employed by me.

*Note: All additional motor vehicle offenses and criminal convictions should be listed on the back of this application.*

**Motor Vehicle Offenses**

<u>Date</u>	<u>Offense</u>	<u>Employee Name</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Criminal History**

<u>Date</u>	<u>Offense</u>	<u>Employee Name</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby swear that the information stated above is true to the best of my knowledge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Justice of the Peace