



Town of Saint Andrews

Peddler's License Application

212 Water Street, Saint Andrews, N.B., E5B 1B4

Applicants Name _____

Address _____

Phone _____ Email: _____

Description of Product or Service* _____

Hours of Operation _____

Days of Operation _____

Proposed Location _____

Person in Direct Charge** _____

Phone _____ Address _____

Operational Season _____

Anticipated Start Date _____

* Applicants may include more details regarding their business operations and/or products as an attachment to this application, *Please check this space if your Application has extra details attached* ____ .

** The name and contact information of the person or persons **who will be in direct charge of conducting the temporary business / peddling or hawking.**

Signature of Business Owner/Manager _____

Application Date _____

Permits are issued pursuant to Bylaw No.75.

A Bylaw of the Town of Saint Andrews Regulating and Licensing Peddlers and Transient Traders.