INSTRUCTIONS FOR STATIONARY PEDDLER LICENSE

1. **PROOF OF OWNERSHIP OF PROPERTY** for proposed peddling location or a notarized consent letter signed by the property owner.
2. Department of Permits & Zoning to verify if location has proper zoning code ROOM 301 or 851-1667 or 851-4926
3. COPY OF GOVERNMENT ISSUED PHOTO ID (i.e., Driver’s License)
4. COMPLETE THE ATTACHED APPLICATION
5. COPY OF NY STATE TAX ID CERTIFICATE
   Apply online at [www.opal.gov](http://www.opal.gov) For assistance, call 518-485-2889.
6. **PROOF OF HEALTH DEPARTMENT PERMIT** if selling food.
   503 Kensington BB; 961-6805
7. If a conveyance (ex: ice cream truck) include a PHOTO of truck, insurance, registration.

RESTRICITIONS for STATIONARY PEDDLER

1. **NO PEDDLING/VENDING** in the **special downtown district** or an area designated as restricted.

2. **NO PEDDLING/VENDING** in or near city parks, playgrounds, schools, city markets or commercial business districts.

3. **NO STATIONARY PEDDLING/VENDING IN CITY RIGHT OF WAY.**

4. **PEDDLING/VENDING HOURS OF OPERATION:**
   Monday through Saturday – 7:00AM – 7:00 PM.
   NO peddling is allowed on **SUNDAYS**
STATIONARY PEDDLER LICENSE APPLICATION
(On Private Commercial Property ONLY) In compliance with City Ordinance Chapter 316

EXPIRATION DATE: April 30th

Date _____________________

Applicant Name ____________________________________________ Phone ________________

Applicant Address ____________________________________________

street city state zip

State Tax ID # ____________________________

Date of Birth ___________________ Place of Birth ___________________ Age __________

U.S. Citizen □ Yes □ No Date of Naturalization ________________

Have you ever been convicted of a crime? □ Yes □ No
If yes, give details of the disposition of each conviction:

Items to be peddled ____________________________________________

Type of conveyance to be used: (ex: cart, table, etc) ____________________________________________

Proposed days & hours of operation: ____________________________________________

Peddler license & Peddler Conveyance License Fee $136.00

__________________________________________

Applicant Signature

Subscribed and sworn before me this
______ day of ______________________ 20 ______

__________________________________________

Commissioner of Deeds in and for the City of Buffalo
City of Buffalo Stationary Peddler License
Property Owner Affidavit

Name: __________________________________________

Address: ______________________________________ Phone: ________________________________

I hereby verify that I am the legal owner of the property located at:

__________________________________________ Buffalo NY __________
No. Street (Assessed Address)

I hereby acknowledge & give permission to peddle from my private property to:

Peddler’s name __________________________________________ to sell his/her goods, wares

and/or merchandise at the property as described above.

I am aware that all peddling must be conducted on my private property from:

Peddling Location: example, Side lot, Rear Yard. No license shall be permitted in any
parking lot to be used by any vendor unless conducted in a permanent building that complies
with the building ordinances.

By signing this affidavit, I hereby release the City of Buffalo from all responsibility
& liabilities concerning the actions of the above named individual when peddling from
this property.

________________________________________
Property Owner Signature

________________________________________
Print Name

________________________________________
Sworn to before me this
____day of ___________ 20__

________________________________________
Notary of the Public