

**CHRISTMAS TREE SALES
PERMIT APPLICATION**

PROPERTY OWNER INFORMATION

Name:			Date:	
Current Address:		City:	State:	Zip:
Date of Birth:	Phone:	E-mail	Driver's License #:	
Type of Business: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit <input type="checkbox"/>				

LIST OF OFFICERS

Name & Address:	Title	Phone:
Name & Address:	Title	Phone:
Name & Address:	Title	Phone:
Name & Address:	Title	Phone:

COMPANY / ORGANIZATION INFORMATION

Company Name:		Name of Proprietor:		
Business Address:	City:	State:	Zip Code:	
Type of Business: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit <input type="checkbox"/>				

LIST OF OFFICERS

Name & Address:	Title	Phone:
Name & Address:	Title	Phone:
Name & Address:	Title	Phone:
Name & Address:	Title	Phone:

DATE (S) & HOURS OF OPERATION

Location:	Date:	Hours:
Address	City/State	Phone:

INSURANCE INFORMATION

A minimal of \$500,000 liability insurance and the endorsement with a certificate of insurance naming the City of New Rochelle as additionally insured must accompany this application.

Name of Carrier:	Address:	City/State/Zip
Property Owner:	Company/Organization:	

SIGNATURES

I hereby apply for a Christmas Tree Sales Permit, and bind myself and the property owner to the due observance of all laws and regulations governing same in the City of New Rochelle and further certify that all unsold trees will be removed from the property no later than December 31st.

Signature of applicant:	Date:
Signature of property Owner:	Date:

NOTARY OR COMMISSIONER OF DEEDS

Sworn and Subscribed to Before Me:	Seal:
Address:	
This _____ day of _____, 20_____	

CITY OF NEW ROCHELLE AUTHORIZATIONS

1. RISK MANAGER

I have investigated the insurance policy and certificate of the foregoing property / organization and they comply

Signature	Date
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2. BUILDING DEPARTMENT

I have examined the location designated and it conforms to our Zoning Regulations for the storage and display of Christmas Trees

Signature	Date
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3. FIRE DEPARTMENT

I have examined the location described in this application and certify that the storage and display of Christmas Trees comply with the requirements of Fire Department for the safety of persons at this sale.

Signature	Date
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4. POLICE DEPARTMENT

I have investigated the character and reputation of the foregoing applicant and business and they comply with the requirements of the Police Department

Signature	Date
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5. CORPORATION COUNSEL

I have examined the application and public liability insurance policy covering the business and naming the City of New Rochelle as additional insured with a minimal coverage of \$500,000

Signature	Date
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6. CITY CLERK

Signature	Date
License No.	Receipt No.
FEE: \$110.00	Expiration Date:

(City Seal)