

Christine Dennett
Village Clerk

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Briarcliff Manor, NY 10510
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www.briarcliffmanor.org

APPLICATION FOR PERMIT FOR CARTING LICENSE

1. APPLICANT	
Name:	Address:
Phone:	
Email:	
Westchester County Hauling License Number (provide copy):	

2. Has applicant or any person to be employed herein by applicant, ever been convicted of a crime?		
Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please provide detail:

3. Vehicle(s) Information (Year, Make, Model, Plate Number)
Vehicle 1:
Vehicle 2:
Vehicle 3:

4. Has applicant ever been refused or denied a similar license from any other municipality, or has their license ever been revoked by any other municipality?		
Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please provide detail:

****Provide a separate sheet detailing address and name of customers in the Village of Briarcliff Manor.****

The Applicant attests that all the foregoing information is true and accurate.

Applicant's Signature: _____ Date: _____

OFFICE USE ONLY	
Fee Payable to Village of Briarcliff Manor: <u>\$500</u>	Payment Information: _____
Village Clerk's Signature: _____	Date Approved: _____