



CENTRAL PERMIT OFFICE

CITY OF SYRACUSE, MAYOR BEN WALSH

Peddler License Instructions

Overview: This license is required to vend (non-food) on the streets of the City of Syracuse. No person shall occupy a vendor's stand on city property without this license. Applications are processed on a first-come, first-serve basis. It will take at least 2 weeks to process your application. For more information, [click here to read the Ordinance](#).

Application Contents:

- License Requirements
- Application Checklist
- Submittal Instructions
- Peddler License Application, pages 2 to 4

License Requirements:

- The vending area is limited to a 20 square feet location, allowing one 4x4 card table per location.
- A vendor must always have the license on site. The name on the license must match the operator.
- If you are requesting more than one location, please fill out an application for each location.
- No person shall suspend or place any wares, goods, or merchandise in front of any store, or place anything to obstruct the free passing of any sidewalk or crosswalk.
- Vending is only allowed between 8 a.m. to 9 p.m. in a business district or 10 a.m. to 6 p.m. in a residential neighborhood.
- A City review must be conducted to issue the license.
- You must choose a location before submitting your application. We cannot choose a location for you. Contacting the Department of Public Works for location approval before applying is recommended.

Application Checklist:

- Contacted the Department of Public Works (315-448-2489) for location approval.
- Completed Peddler License Application (pages 2 to 4). The application must be signed in the presence of a notary public.
- Application Fee (see page 2). Check or Money Order payable to Commissioner of Finance.
- Copy of Applicant's Photo Identification: Driver's License, Passport, or equivalent.
- 2 Passport Quality Photographs of Applicant/Vendor. Dimensions: 2" x 2".

Submittal Instructions:

1. Application must be completed in its entirety. Incomplete applications will not be processed.
2. Application, fee, and documents must be submitted to:

City of Syracuse, Central Permit Office

One Park Place

300 South State St.

Syracuse, NY 13202

315-448-8474 | Licensing@syr.gov



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Peddler License Application – Part 1

License Fees:

- \$75 Per Month
- \$50 Per Week
- \$20 Per Day

Type of Goods, Wares, Services and/or Merchandise being offered: _____

Start Date: _____

End Date: _____

Name: _____

Date of Birth: _____

Address: _____

Phone: _____ Age: _____

Height _____ Weight _____ Hair _____ Eyes _____

False replies to any of the questions herein under the law constitute perjury. Detection of such falsity will result in refusal of license, or, if granted, in revocation of same.

I have read the instruction sheet and agree and understand the hours of operation: _____
(Applicant Signature)



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Peddler License Application – Part 2 Department of Public Works

Name of Person Operating Cart: _____

Address: _____

Phone: _____

Business Name: _____

Business Address: _____

Business Phone: _____

Type of Goods, Wares, Services and/or Merchandise being offered: _____

Location Requested (Be Specific): _____

Signature: _____

Date: _____

{FOR OFFICE USE ONLY}

APPROVED _____ DISAPPROVED _____ REVOKED _____

COMMENTS _____

DATE RECEIVED BY DPW: _____

SENT TO CENTRAL PERMIT OFFICE: _____

DATE LICENSE ISSUED _____

LICENSE # _____



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The undersigned _____ does hereby apply to the License Commissioner of the City of Syracuse, State of New York, for a Peddler License pursuant to the Revised General Ordinances of the City of Syracuse.

Indemnification Statement

Upon issuance of this license, the applicant agrees to indemnify, defend, and hold harmless the City of Syracuse, its officers, agents, and employees from and against all damages, claims costs, or expense arising from the issuance of this license, provided that such damage, claim cost or expense is attributable to bodily injury, sickness, disease, or death or damage to property. This indemnity shall survive the expiration and/or termination of this license.

Section below to be completed in the presence of Notary Public:

Applicant Signature _____ Date: _____

Duly sworn to before me on this ____ Day of _____, 20____,

by _____.
Applicant Name

SEAL/STAMP

Notary Public Print Name

Notary Public Signature