



Town of South Bethany
402 Evergreen Road
South Bethany, DE 19930

2016/2017 Mercantile License Application
(Nov 1, 2016 to April 30, 2017)

Name of Business: _____

Name of Owner(s): _____

Mailing Address: _____

City/State/Zip: _____

Business Phone: _____ Home Phone: _____

Cell Phone: _____ E-Mail: _____

EIN: _____ Fax: _____

Full Description of Nature of the Activity for which this Mercantile License is requested:

I hereby certify that I will comply with the applicable provisions of the Code of the Town of South Bethany.

I certify that if my licensed activity involves the construction of a building or facility on any property within the Town of South Bethany, I will refrain from traversing or utilizing any adjacent or neighboring property unless I obtain written permission from such property owner. I certify that I will be financially liable to such property owner for any damage committed to their property by myself, any of my employees or agents, or any independent contractors. I further agree that I will assure that any employees or agent and independent contractors are made aware of the appropriate regulations, including permitting, display of permit and times allowed for construction. I will also be responsible for damage to public right-of-way. I also certify that I will place adequate trash containers on the property and will comply with all appropriate regulations. If my license activity involves the use of herbicides, pesticides, or other hazardous materials, I will advise the Town of the types and quantities.

Work Hours: 8 a.m. to 6 p.m. - Monday thru Friday. No construction - 6 p.m. to 8 a.m.; or Sundays;
No construction on Saturday, Sundays or National Holidays from May 15 through September 15.

License Fee: \$ 80.00 if purchased from November 1, 2016 through April 30, 2017
(License valid from November 1, 2016 to April 30, 2017)

Check submitted in the amount of \$ _____ Check # _____, payable to Town of South Bethany, with
a copy of your State of Delaware Business License and Certificate of Liability Insurance.

Signature of Owner/Authorized Agent

Date Submitted