WEST PENNSBORO TOWNSHIP CUMBERLAND COUNTY, PA. 2150 NEWVILLE ROAD CARLISLE, PA 17015 PHONE (717) 243-8220 FAX (717) 243-1592

APPLICATION FOR A PEDDLING/SOLICITING PERMIT

BUSINESS INFORMATION										
Company Full Name:										
Owner Name (First, Middle, Last):										
Phone: Mobile:			E-M	E-Mail:				Fax:		
Registered Company Address:										
1				te:			ZIP:			
Type of Goods or Service To Be Peddled/Solicited:										
Begin Date: End Date: Approx. Area of Twp.										
APPLICANT INFORMATION										
Name (First, Middle, Last):										
Address: State: ZIP:								IP:		
How long at current address?				SSN:				Sex:		
Telephone:	elephone: Mobile:			Email:			Fax:			
Date of Birth:										
Race: Height	ace: Height: Weight:			Hair Col	or:		Eye Color:			
Driver's License/State ID Numb	ver's License/State ID Number: Issuing S			e:	VIN:	•				
Vehicle Make:	Model:			Year:	C	Color:	Т	Tag#:		
Have You Ever Been Arrested? ()Yes ()No										
If Yes, What Charges?										
Are you a U.S. Citizen? ()Yes ()No (If no, you must provide a copy of your Alien Registration card)							ration card)			
ADDITIONAL PERSONNEL INFORMATION										
Name (First, Middle, Last):										
Address:				State:			Z	IP:		
How long at current address?				SSN:				Sex:		
Telephone:	hone: Mobile: Email: Fax:									
Date of Birth:		Place of	Birth:							
Race: Height	Race: Height: Weight: Hair Color: Eye Color:							Color:		
Driver's License/State ID Number: Issuing State:										
Vehicle Make: Model:			Year: Color:			Tag#:				
Have You Ever Been Arrested? ()Yes ()No										
If Yes, What Charges?										
Are you a U.S. Citizen? ()Yes ()No (If no, you must provide a copy of your Alien Registration card)										
ADDITIONAL PERSONNEL INFORMATION										
Name (First, Middle, Last):										
Address:				State:			Z	IP:		
How long at current address?			SSN:				Sex:			
Telephone:	phone: Mobile: Email:				Fax:					
Date of Birth:										
Race: Height: Weight: Hair Color: Eye Color:						Color:				
Driver's License/State ID Numb	er:			Issuin	g State	::				
Vehicle Make:	Model:			Year:	С	Color:	Т	ag#:		
Have You Ever Been Arrested?	()Yes ()	No	If Yes, When	n and Whei	re?		•			
If Yes, What Charges?										
Are you a U.S. Citizen? ()Yes ()No (If no, you must provide a copy of your Alien Registration card)										

ADDITIONAL PERSONNEL INFORMATION									
Name (First, Middle, Last):									
Address:						State:	7	ZIP:	
How long at current address?				SSN:			,	Sex:	
Telephone: Mobile:				Email: Fax:					
Date of Birth:									
Race:					Hair Color:		Eye (Color:	
Driver's License/State ID Number:					Issuing State:				
Vehicle Make: Model:				Ye	ear: Color: Tag#:				
				nen and Where?					
If Yes, What Charges?									
Are you a U.S. Citizen?	()Yes ()No	(If	no, you must	pro	ovide a copy c	of your Alien	Regist	tration card)	
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Name (First, Middle, La	st):								
Address:						State:		ZIP:	
How long at current ad	dress?			SSN:			•	Sex:	
Telephone:	Mobi	le:		Е	mail:		Fax:		
Date of Birth:		Place of	Birth:				•		
Race:					Hair Color:		Eye (Color:	
Driver's License/State I	Driver's License/State ID Number:				Issuing Stat	e:			
Vehicle Make: Model:				Ye	ar:	Гаg#:			
			If Yes, When	en and Where?					
If Yes, What Charges?									
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	А					State:		ZIP:	
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1.	All information	provided on the application	is true and correct to the best of my knowledge.
	☐ AGREE	□ DISAGREE	
2.	I understand tha	at completing and submittir	ng this application is not approval of a permit.
	☐ AGREE	☐ DISAGREE	
3.			ry for all and any actions made by the company and/or nyself and all others listed on the application.
	☐ AGREE	□ DISAGREE	
4.		eddling and Solicitation Ord	e by West Pennsboro Township Ordinance #2010-04, also inance. This shall also include all other persons listed on
	☐ AGREE	□ DISAGREE	
5.		e that West Pennsboro Tow elf and any other persons l	nship has the right to complete a criminal background isted on the application.
	☐ AGREE	☐ DISAGREE	
6.	identification of	me and all other persons li	drivers' licenses or any other current form of photo sted on the application. (If photo ID is not an official d that verifies person in the photo is who they say there
	☐ AGREE	□ DISAGREE	
thereir Towns the fac	n and hereafter for hip, Cumberland cts stated above a	pe the purpose of securing County, PA, and I have rea	king the forgoing application and make said statements a Peddling/Solicitation Permit with West Pennsboro d the entire application, know the contents thereof, affirm familiar with the West Pennsboro Township
			Applicant
			, in the year of 20, before me, ally appeared,
			ce to be the person whose name is subscribed to the within
-		vledged the he/she execute	·
			Notary Public

By completing and submitting this application for approval, I hereby state the following:

OFFICIAL USE ONLY
THIS APPLICATION HAS BEEN REVIEWED AND IS HERBY:
APPROVED
DENIED
IF PERMIT HAS BEEN DENIED, LIST REASON:
DATE OF ACTION
DATE OF ACTION:
TOWNSHIP OFFICIAL: