

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-Mail:	Fax:
Registered Company Address:			
City:	State:	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:
How long at current address?		SSN:	Sex:	
Telephone:	Mobile:	Email:	Fax:	
Date of Birth:		Place of Birth:		
Race:	Height:	Weight:	Hair Color:	Eye Color:
Driver's License/State ID Number:		Issuing State:	VIN:	
Vehicle Make:	Model:	Year:	Color:	Tag#:
Have You Ever Been Arrested? ()Yes ()No		If Yes, When and Where?		
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:	ZIP:
How long at current address?		SSN:	Sex:	
Telephone:	Mobile:	Email:	Fax:	
Date of Birth:		Place of Birth:		
Race:	Height:	Weight:	Hair Color:	Eye Color:
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By completing and submitting this application for approval, I hereby state the following:

1. All information provided on the application is true and correct to the best of my knowledge.
 AGREE DISAGREE
2. I understand that completing and submitting this application is not approval of a permit.
 AGREE DISAGREE
3. As the applicant, I fully accept responsibility for all and any actions made by the company and/or organization I am representing, including myself and all others listed on the application.
 AGREE DISAGREE
4. I have read, fully understand, and will abide by West Pennsboro Township Ordinance #2010-04, also known as the Peddling and Solicitation Ordinance. This shall also include all other persons listed on this application.
 AGREE DISAGREE
5. I am fully aware that West Pennsboro Township has the right to complete a criminal background check upon myself and any other persons listed on the application.
 AGREE DISAGREE
6. I will provide clear and legible copies of all drivers' licenses or any other current form of photo identification of me and all other persons listed on the application. (If photo ID is not an official drivers license, then proof must be provided that verifies person in the photo is who they say there are).
 AGREE DISAGREE

Being duly sworn, deposes and says, that I am making the forgoing application and make said statements therein and hereafter for the purpose of securing a Peddling/Solicitation Permit with West Pennsboro Township, Cumberland County, PA, and I have read the entire application, know the contents thereof, affirm the facts stated above and hereafter true, and am familiar with the West Pennsboro Township Peddling/Solicitation Ordinance #2010-04.

X

Applicant

On this _____ day of _____, in the year of 20____, before me,
_____, personally appeared _____,
provided to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged the he/she executed the same.

Notary Public

OFFICIAL USE ONLY

THIS APPLICATION HAS BEEN REVIEWED AND IS HERBY:

APPROVED

DENIED

IF PERMIT HAS BEEN DENIED, LIST REASON:

DATE OF ACTION: _____

TOWNSHIP OFFICIAL: _____