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AFFIX PHOTO HERE



P.O. Box 1, Pocopson, PA 19366 664 S. Wawaset Road, West Chester, PA 19382 Office: 610.793.2151 Fax: 610.793.1944 www.pocopson.org

## **PEDDLING & SOLICITING REGISTRATION APPLICATION**

Applicant shall submit this form in person along with two passport-sized photographs and non-refundable fee of \$150 by check payable to Pocopson Township or cash (exact amount only). A photo-copy will be made of the Proof of Identification provided.

Applicant's Name:			Date of Birth:	
		Last, First, M.I.		
Local Address:			Permanent Address:	
	Street N	ame & Number, P.O. Box and/or Apt #	(If different from local)	Street Name & Number, P.O. Box and/or Apt #
City, St		te & Zip Code	_	City, State & Zip Code
Phone:		Email:	Proc	of of Identification:
Employer:		Supervisor:		
Employer's Ad	dress:	Street Name & Number, P.O. Box and	/or Aret #	
		Street Name & Number, P.O. Box and	/or Apt #	
		City, State & Zip Code		
Employer's Phone:		Email:		Tax ID #:
	the mer	s or activity in which applican rchandise or services to be so	ld/performed:	ile in the Township. Include a
Make, Model &				
License Plate #:		Vehicle Registration Exp. Date:		
Operator Driver's License Number:		Exp. Date:		
please state w	hat crin	ne or crimes, the penalty or p	unishment imposed, tl	her than minor traffic violations? If so, ne date(s) and place(s) of the offense(s)
	•	ssess all licenses or permits , please list		sed activity under federal state, county o

Number of Assistants (each assistant shall submit a separate registration): \_\_\_\_

## SOLICITING WILL BE CONDUCTED IN POCOPSON TOWNSHIP BETWEEN THE HOURS OF 9:00 AM AND 9:00 PM.

I hereby verify and affirm that all the information on this application is true, correct and complete to the best of my knowledge and ability. I understand the regulations set forth in Chapter 150 of the Code of Pocopson Township, titled "Peddling and Soliciting", and that this registration shall expire 60 days after approval but may be renewed for additional thirty-day periods by payment of a renewal fee of \$50.

Signature of Applicant: \_\_\_\_\_