

MARLBOROUGH TOWNSHIP

APPLICATION FOR PEDDLERS, VENDOR, SOLICITORS PERMIT

Date _____

Name of Applicant (print) _____ Signature _____

Address _____ Zip Code _____

Phone # _____ E-Mail _____

Applicant if other than Individual, e.g. Partnership, Corporation, etc.) complete the following:

Name and Title _____ Tax I.D. _____

Address _____ Zip Code _____

Phone # _____ E-Mail _____

ALL OF THE FOLLOWING MUST BE COMPLETED WITH ATTACHMENTS

Photo I.D. type _____ Drivers License # and copy _____

Vehicle Description (photos), License # _____ State _____

Criminal background check from Pa State Police.

Names and addresses and contact person with phone #, of supplies to be sold.

Pa Sales Tax Certificate with No. or Certificate of Exemption.

Description of type of activity.

Location of activity with plot plan – showing size and location of vehicle with dimensions for vehicle with distances measured from streets, driveways, streams, buildings, etc.

Days and hours of activity requested _____

(Limits; Monday through Saturday 9:00 AM to 5:00 PM, NO Sundays)

\$50.00 ZONING FEE PLUS PERMIT FEE PER PERSON – SEE SCHEDULE

TOWNSHIP USE ONLY BELOW

PERMIT # _____ DATE ISSUED _____ DATE EXPIRES _____

FEE PAID \$ _____ CHECK# _____ CASH _____

APPROVED BY _____ DATE _____