



UPPER PROVIDENCE TOWNSHIP POLICE DEPARTMENT

MONTGOMERY COUNTY, PENNSYLVANIA

1286 BLACK ROCK ROAD, Phoenixville, PA 19460

Phone: 610-933-7899 Fax: 610-983-0730



SOLICITATION/PEDDLING PERMIT APPLICATION

This application must be completed in its entirety by each individual solicitor. If there are sections that do not apply, write "N/A" in that section. Color copies of either a current driver's license or government issued photo ID must be provided for each individual solicitor. Checks should be made payable to "Upper Providence Township The approval process may take up to 5 business days. Soliciting shall not commence until the permit has been approved.

PERMIT MUST BE CARRIED AT ALL TIMES WHILE SOLICITING.

PERMITTED SOLICITING HOURS OF OPERATION

Monday through Sunday: 9:00 am – 8:00 pm OR 30 minutes past dusk, whichever occurs first.

APPLICANT INFORMATION (Please Print):

Name: _____ Soc. Sec. #: _____ Birthdate: _____

Home address: _____

Local address: _____

Driver's lic # & state: _____ Home/Cell Phone (circle one): _____

Sex: ____ Height: _____ Weight: _____ Hair color: _____ Eye color: _____

VEHICLE INFORMATION:

Year: ____ Make: _____ Model: _____ License Plate: _____ State: _____

Owner's Name: _____ Owner's Address: _____

EMPLOYER INFORMATION: NON-PROFIT ORGANIZATION (circle one): YES NO

Name: _____ Supervisor Name: _____

Business Address: _____ Phone: _____

Description of business/goods to be sold: _____

I affirm that the information set forth above is true and correct to the best of my knowledge and have been warned that I am subject to arrest under §4909(a) of the PA Crimes Code/Unsworn Falsification to Authorities for any false information is set forth.

Date of Application: _____ **Signature:** _____

Office Use Only

Payment: cash/check/cc (circle one) Check if received: Driver's license ____ Photo ID ____

Date of approval: _____ By (initials): _____

Permit #: _____ Expires: _____ Issued By: _____