

EAST MARLBOROUGH TOWNSHIP POLICE DEPARTMENT
721 UNIONVILLE ROAD ~ KENNETT SQUARE, PA 19348 ~ 610-444-5075
SOLICITOR'S PERMIT APPLICATION FORM

NAME: _____
(Last) (First) (Middle)

PERMANENT ADDRESS: _____

Temporary While Soliciting: _____ PHONE: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

EYES: _____ HAIR: _____ HEIGHT: _____ WEIGHT: _____

DRIVER'S LICENSE #: _____ STATE: _____ DATE ISSUED: _____

VEHICLE INFO: MAKE: _____ MODEL _____ YEAR _____

COLOR: _____ LICENSE PLATE: _____ STATE: _____

REGISTERED TO: _____ PHONE: _____

STATE SPECIFICALLY: The nature of the business or activity in which you wish to engage within the Township: _____

_____ Length of Time: _____

The location in the Township where the sales will occur: _____

NAME OF PARENT COMPANY: _____ PHONE: _____

ADDRESS: _____

CONTACT PERSON: _____ TITLE: _____

TAX ID No: _____

HAVE YOU EVER BEEN CONVICTED IN ANY JURISDICTION OF ANY CRIME OTHER THAN MINOR TRAFFIC VIOLATIONS, AND, IF SO, WHAT CRIME OR CRIMES? _____

DO YOU POSSESS ALL LICENSE OR PERMITS REQUIRED FOR THIS ACTIVITY UNDER OTHER FEDERAL, STATE OR LOCAL LAW? _____

YOU MUST PROVIDE AND ATTACH A BACKGROUND HISTORY FROM THE FOLLOWING WEBSITE:

<http://epatch.state.pa.us>

By signing this form, I hereby authorize the East Marlborough Township Police Department to conduct a criminal history investigation as to my background. I understand that if the information learned by this investigation and the information I provided in this form do not agree, this is reason for denying the license.

SOLICITING WILL BE CONDUCTED IN EAST MARLBOROUGH TOWNSHIP BETWEEN THE HOURS OF 9:00AM AND 30 MINUTES AFTER SUNSET. THE SOLICITOR WILL DISPLAY THE LICENSE CARD AT ALL TIMES AND EXHIBIT UPON REQUEST OF ALL POLICE OFFICERS, TOWNSHIP OFFICIALS AND CITIZENS OR RESIDENTS OF THE TOWNSHIP.

I have read and understand the East Marlborough Township's Solicitor's Application Form and the Solicitation Ordinance, and all entries are true and correct.

SIGNATURE: _____ DATE: _____

WITNESS: _____ DATE: _____

Applicant must return this form to the East Marlborough Township Police Department along with their background history, two (2) photographs (two inch by three inch minimum) along with a non-refundable fee of \$100. Checks should be made payable to "East Marlborough Township"

DO NOT WRITE BELOW THIS LINE---POLICE DEPARTMENT USE ONLY

LICENSE NUMBER: _____ DATE ISSUED: _____ EXPIRATION: _____