

# CHESTNUTHILL TOWNSHIP

P.O. BOX 243, ROUTE 715 SO.  
BRODHEADSVILLE, PA. 18322  
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## PEDDLING AND SOLICITING PERMIT APPLICATION

FEE: \$50.00

PERMIT# \_\_\_\_\_ CHECK # \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ PHONE#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TYPE OF PRODUCT OR SERVICE: \_\_\_\_\_

WILL A MOTOR VEHICLE BE UTILIZED? \_\_\_\_\_ OTHER: \_\_\_\_\_

MAKE/MODEL: \_\_\_\_\_ PLATE # & STATE \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

REQUESTED TIME PERIOD: \_\_\_\_\_ TO \_\_\_\_\_

HAS APPLICANT BEEN CONVICTED OF ANY CRIMES: \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES EXPLAIN: \_\_\_\_\_

RECEIVED AND READ A COPY OF PROCEDURES SET FORTH IN THE ORDINANCE:

\_\_\_\_\_ YES \_\_\_\_\_ NO

ADDITIONAL REQUESTS OR COMMENTS: \_\_\_\_\_

*I fully understand the provisions of this application and herby certify that all  
Information submitted is true and correct to the best of my knowledge.*

APPLICANT SIGNATURE: \_\_\_\_\_

PERMIT DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_ REASON: \_\_\_\_\_