

**PERMIT APPLICATION
Peddling & Solicitation
Borough of Curwensville
Ordinance 486**

Name of Applicant: _____ **Date:** _____

Applicant's Phone Number _____

Applicants Employer: _____

Address of Employer: _____

Employer's Phone: _____

Employer Contact: _____

**Applicants Driver's License
or State Photo ID** **State of Issue:** _____ **Number:** _____

Applicants Vehicle: **Make:** _____ **Model:** _____ **Color:** _____

License Plate : **State:** _____ **Number:** _____

Purpose For Permit: _____

Number of Days Requested: _____ **Date(s)** _____

By signing below, I certify the information listed above to be accurate. I understand that falsifying this information could result in fines up to \$300 and imprisonment of up to 30 days. I will not use this permit for any purpose other than what is listed above and will adhere to all laws and ordinances of the Borough of Curwensville.

Signature of Applicant: _____

OFFICIAL USE ONLY:	
Signature of Approving Officer:	Date: