TOWNSHIP OF DELANCO
SOLICITATION / PEDDLERS APPLICATION

NAME FIRST	MIDDLE NAME	LAST	ALIAS / NICKNAME

ADDRESS (NUMBER - STREET - MUNICIPALITY - STATE)	PLACE OF BIRTH

DATE OF BIRTH	AGE	SEX	RACE	HEIGHT	WEIGHT	HAIR	EYES	MARITAL STATUS	SOCIAL SECURITY NUMBER

OTHER DESCRIPTIVE INFORMATION: GLASSES,SCARS,MARKS,TATTOOS,MUSTACHE,BEARD,ETC.

HAVE YOU EVER BEEN FOUND GUILTY OF OR PLEADED GUILTY TO A VIOLATION OF THE LAW? YES ☐ NO ☐

IF YES - DESCRIBE (LIST CHARGES - WHEN AND WHERE CHARGED - CONVICTIONS)

DRIVERS LICENSE NUMBER AND STATE	RESIDENTIAL PHONE	CELL PHONE:	BUSINESS PHONE

BUSINESS NAME	ADDRESS

NAME OF BUSINESS CONTACT PERSON (SUPERVISOR - MANAGER - OWNER - ETC.)

TYPE OF SOLICITATION - PEDDLING
DOOR-TO-DOOR ☐ MOTOR ROUTE ☐

SOLICITATION - PEDDLING INTENT
MERCHANDISE SALES ☐ PERISHABLE SALES (ICE CREAM, SNACKS, ETC.) ☐ SUBSCRIPTIONS ☐
DONATIONS ☐ INFORMATIONAL SURVEYS ☐ OTHER (EXPLAIN) ☐

EXPLANATION:

LOCATIONS - ROUTES OF SOLICITATION:	INTENDED HOURS OF SOLICITATION - PEDDLING	TYPE OF PERMIT REQUESTED
	BEGIN: END:	DAILY PERMIT ($5) ☐ YEARLY PERMIT ($25) ☐

VEHICLE INFORMATION

YEAR	MAKE	MODEL (2 DOOR - 4 DR- TRUCK ETC.)	COLOR	REGISTRATION # AND STATE

APPLICANT'S PHOTOGRAPH:

APPLICANT MUST SUPPLY:

PHOTOCOPY OF APPLICANT'S DRIVER'S LICENSE AND SOCIAL SECURITY CARD
UPON RETURNING THIS APPLICATION, THE APPLICANT SHALL BE PHOTOGRAPHED BY POLICE PERSONNEL FOR INCLUSION ON THE PERMIT

I SOLEMNLY SWEAR THAT THE FOREGOING INFORMATION IS TRUE AND FACTUAL

DATE: _____

_____
SIGNATURE OF APPLICANT

REMARKS - FOR OFFICE USE ONLY

DATE RECEIVED	RECEIVING OFFICER	BADGE NUMBER	EFFECTIVE DATE	PERMIT NUMBER