

CONCORD TOWNSHIP

APPLICATION FOR SOLICITATION PERMIT

NAME: _____ SOCIAL SECURITY #: _____

ADDRESS: _____

PHONE NO.: _____ EMAIL: _____

DATE OF BIRTH: _____ SEX: _____

EMPLOYER: _____

ADDRESS OF EMPLOYER: _____

EMPLOYER TELEPHONE #: _____

TYPE OF BUSINESS: _____

MAKE & YEAR OF VEHICLE: _____

MOTOR VEHICLE REGISTRATION # _____

OPERATOR'S LICENSE # _____

CRIME CONVICTIONS: YES NO

DETAILS OF VIOLATION: _____

- Concord Township reserves the right to REVOKE a permit for misconduct or reports of harassment.

PHOTOGRAPH

SIGNATURE: _____

DATE: _____

COMMONWEALTH OF PENNSYLVANIA)

COUNTY OF DELAWARE)

Signed and sworn to (or affirmed) before me on this _____ day of _____, 20____

by _____.

.

Notary Public

FOR TOWNSHIP USE

Fee Received _____

Application Approved _____

Application Not Approved _____
