

TOWNSHIP OF SPRINGFIELD
PEDDLING/SOLICITING LICENSE APPLICATION

Springfield Township
50 Powell Road
Springfield, PA 19064

phone - 610-544-1300
fax - 610-544-3012

License No. _____

Date Issued _____

The undersigned hereby applies to the Board of Commissioners of Springfield Township for a Peddling/Soliciting License for the balance of the current calendar year and under the same proposes to sell the following:

Goods or Services to be Sold	Supplier's Name & Address
_____	_____
_____	_____
_____	_____

Applicant's Name & Address: _____

Applicant's Telephone Number _____

Applicant's Driver's License Number _____

Have You Ever Been Convicted of a Crime? YES _____ NO _____

If yes, describe details _____

Make & Model of Vehicle(s) to be Used _____

Number of Vehicles to be Used _____

License Plate Number(s) _____

Number of Persons Employed _____

List of employee's names must accompany application, plus \$150 per employee/helper.

AND FURTHER, the undersigned hereby affirms that the above information is true, correct and complete.

License Fee: \$200.00

Applicant's Signature

Each Additional Peddler: \$150.00

FEE RECEIVED _____

copy of photo ID required

TOWNSHIP OF SPRINGFIELD

ICE CREAM/FOOD VENDOR

PEDDLING/SOLICITING LICENSE APPLICATION

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Applicant's Driver's License Number _____

Have You Ever Been Convicted of a Crime? YES _____ NO _____

If yes, describe details _____

Make & Model of Vehicle(s) to be Used _____

Number of Vehicles to be Used _____

License Plate Number(s) _____

Number of Persons Employed _____

List of employee's names must accompany application, plus \$150 per employee/helper.

AND FURTHER, the undersigned hereby affirms that the above information is true, correct and complete.

License Fee: \$350.00

Applicant's Signature

FEE RECEIVED _____

copy of photo ID required

TOWNSHIP OF SPRINGFIELD
TRANSIENT RETAIL MERCHANT - SPRINGFIELD MALL
PEDDLING/SOLICITING LICENSE APPLICATION

Springfield Township
50 Powell Road
Springfield, PA 19064

phone - 610-544-1300
fax - 610-544-3012

License No. _____

Date Issued _____

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Goods or Services to be Sold	Supplier's Name & Address
_____	_____
_____	_____
_____	_____

Applicant's Name & Address: _____

Applicant's Telephone Number _____

Applicant's Driver's License Number _____

Have You Ever Been Convicted of a Crime? YES _____ NO _____

If yes, describe details _____

AND FURTHER, the undersigned hereby affirms that the above information is true, correct and complete.

License Fee: (\$10.00 per day)

Maximum Fee - \$350.00

Applicant's Signature

FEE RECEIVED _____

copy of photo ID required