

VERNON TOWNSHIP
16678 McMATH AVENUE MEADVILLE PA 16335 814 337-8126 fax 814 337-5473

PLEASE PRINT CLEARLY

Application is hereby made by the undersigned for a Solicitor Permit in Vernon Township.

Applicant's Name _____

Applicant's Legal Address: _____

Street _____ City _____ State _____
Applicant's Phone Number (____) _____ Applicant's email address: _____

**Applicant's Social Security Number (required for criminal background check) _____

**Date of Birth (required for criminal background check) _____

* Name and Address of Applicant's Employer or Principal: _____
Name _____

Street _____ City _____ State _____

Name and Address and email address (if possible) of two references as to Applicant's reputation are:

Name _____ Name _____

Street _____ Street _____

City & State _____ City & State _____

Email address _____ Email address _____

Business/Profession _____ Business/Profession _____

The said person's names as references are both reputable citizens, business or professional persons and residents in the United States.

Signature of Applicant

Date of Application: _____

Date Permit Issued: _____ Expiration Date: _____

*Certificate required from principal/employer certifying applicant is employed by him and define scope of employment or purpose of solicitation.

ALL PERMITS ARE VALID FOR WEEK DAYS ONLY AND BETWEEN THE HOURS OF 9 AM AND 7 PM.

VERNON TOWNSHIP SUPERVISORS
APPLICATION FOR SOLICITOR/PEDDLER PERMIT

The undersigned has made application to secure a solicitor/peddler permit to be utilized in the Township of Vernon, Crawford County, Pennsylvania.

In connection with my application I understand that if in fact I am eligible for a solicitor/peddler permit I will be subject to a background investigation by the appropriate officials of the Township of Vernon, Crawford County, Pennsylvania. This background investigation shall include, but not be limited to, a criminal history check.

I understand that after completing the application and returning the same to the Township Secretary I will sign this form giving my permission to the township officials to review all information received in connection with the investigation conducted.

Date: _____