WEST EARL TOWNSHIP POLICE DEPARTMENT 157 W. METZLER RD, PO BOX 787 BROWNSTOWN, PA 17508 (717) 859-1411

SOLICITING PERMIT APPLICATION

| NAME: | | | | | |
|---|------------------|-------------|-----------------------|-------|--|
| HOME ADDRESS: | | | | | |
| HOME PHONE: | DOB:SSN: | | | | |
| HGT:WGT: | _HAIR:EYES: | | | | |
| WHERE STAYING: | | | | | |
| COMPANY NAME: | | | | | |
| COMPANY ADDRESS: | | | | | |
| COMPANY PHONE: | SUPERVISORS NAME | E: | | | |
| VEHICLE MAKE:MODE | L:COLOR: | YEAR: | | | |
| VEHICLE LICENSE PLATE NUMBER: | | STATE: | | | |
| DRIVERS LICENSE NUMBER:STATE: | | | | | |
| NATURE OF SOLICITATION: | | | | | |
| Have you ever been convicted of a crime? | | | | | |
| If yes, explain: | | | | | |
| Have you ever had a solicitation permit revoked by the issuing authority: If yes, provide name and location of issuing authority: VERIFICATION: The information I have supplied is true and correct to the best of my knowledge and belief subject to the penalties of Section 4904 of the PA Crimes Code (Relating to unsworn falsification to authorities.) | | | | | |
| | | | APPLICANTS SIGNATURE: | | |
| | | | FOR DEPARTMENT USE: | | |
| | | | APPROVED: YES NO | DATE. | |
| | | | | | |
| APPROVE BY: REASON FOR DENIAL | | | | | |
| FEE PAID: | | | | | |
| ILLIAID. | | | | | |
| DATE OF EXPIRATION | | | | | |
| | | | | | |

APPLICATION FEE IS \$25.00

SUBMIT ONE APPLICATION FOR EACH PERSON WHO WILL BE SOLICITING.

THIS PERMIT, IF APPROVED, EXPIRES 30 DAYS FOLLOWING APPROVED DATE

THIS PERMIT IS NON-TRANSFERABLE

SOLICITING PERMITTED BETWEEN THE HOURS OF 9:00 A.M. AND 9:00 P.M., MONDAY THROUGH SATURDAY.

THIS PERMIT, IF APPROVED, MUST BE CARRIED BY THE APPLICANT WHILE ENGAGED IN SOLICITING AND MUST BE DISPLAYED ON DEMAND BY POLICE, TOWNSHIP OFFICIAL OR TOWNSHIP RESIDENT.