## BIRMINGHAM TOWNSHIP POLICE DEPARTMENT 1040 W. STREET ROAD WEST CHESTER, PA 19382 SOLICITOR'S PERMIT APPLICATION FORM

NAME:		
(Last)	(First)	(Middle)
ADDRESS:		
		Phone:
		Phone:
DATE OF BIRTH:	PL	ACE OF BIRTH:
EYES: HAIR:		
DRIVER'S LICENSE #:	STATE:	DATE ISSUED:
VEHICLE INFO: Make:	Model:	Year:
Color:License Plate:	State	e:
Registered to:	w = 10	Phone:
<b>STATE SPECIFICALLY</b> : The nature of the business or activity in which you wish to engage within the		
Township:		
		Length of Time:
The location in the Township where	the sales will occur:	-
		Phone:
Address:		
		Title:
HAVE YOU EVER BEEN CONVICTED IN ANY JURISDICTION OF ANY CRIME OTHER THAN MINOR		
TRAFFIC VIOLATIONS, AND, IF SO, WHAT CRIME OR CRIMES?		
YOU MUST PROVIDE AND ATTACH A BACKGROUND HISTORY FROM THE FOLLOWING WEBSITE:		
http://www.portal.state.pa.us		
By signing this form, I hereby authorize the Birmingham Township Police Department to conduct a criminal history investigation as to my background. I understand that if the information learned by this investigation and the		
information I provided in this form do not agree, this is reason for denying the license.		
SOLICITING WILL BE CONDUCTED IN BIRMINGHAM TOWNSHIP BETWEEN THE HOURS OF 8:00		
AM AND 6:00 PM, MONDAY THRU SATURDAY ONLY. THE SOLICITOR WILL CARRY THE LICENSE		
CARD AT ALL TIMES AND EXHIBIT IT UPON REQUEST OF ANY POLICE OFFICER OR ANY PERSON		
REQUESTING TO SEE THE SAME. ANY COMPLAINTS CONCERNING THE SOLICITOR WILL RESULT		
IN THE REVOCATION OF HIS OR HER SOLICITOR'S LICENSE AND/OR THE ARREST OF THE		
SOLICITOR.		•
I have read and understand the Birm	ningham Township's	Solicitor's Application Form, and all entries
are true and correct.	J ,	,
		DATE:
WITNESS:		DATE:
Applicant must return this form to the Bir	mingham Township Po	lice Department along with their background
history, two (2) photographs (two-inch by three-inch minimum) along with a non-refundable fee of \$50.00.		
Checks should be made payable to "Birmingham Township"		
DO NOT WRITE BELOW THIS LINE – POLICE DEPARTMENT USE ONLY		
License Number: D	ATE ISSUED:	EXPIRATION: