



PEDDLER, SOLICITOR, VENDOR
Borough of Palmyra
Application

Name of Applicant _____

Permanent home address _____

Telephone and or contact umber _____

DOB _____ **SS#** _____

A photo ID must be provided of person completing this application

Name and address of firm represented _____

Name and address of the person from whom goods making up the stock were or able to be purchased _____

Three (3) business references including address and phone

The place or places of residence of the applicant for the three (3) proceeding year's

The length of time for which the license is desired _____

A description of the wares to be offered for sale or materials to be distributed

- “silly string” and shaving cream is prohibited

The number of either arrests or convictions for misdemeanors, crimes or violations of municipal ordinances _____

The nature of the offenses for which arrested or convicted _____

A letter from the firm for which the applicant purports to work, authorizing the applicant to act as its representative, must be appended to this application

Name and address of the applicant’s employer or organization, which the applicant represents _____

Please provide names, addresses, DOB, Social Security # and Photo ID (copy) of each employee to be included on this permit. The Borough of Palmyra reserves the right to conduct a background check on the applicant.

No License shall be issued until the application shall have been approved by the Police Department, allowing adequate time for investigation of the facts stated in the application.

Please provide the \$\$60.00 application fee with this application. Checks should be made payable to PALMYRA BOROUGH. No refunds if application is denied.

A COPY OF YOUR COUNTY HEALTH CERTIFICATE IS REQUIRED IF YOU ARE ALSO APPLYING FOR A FOOD HANDLING LICENSE.

Signature of Applicant

BOROUGH CLERK

Application fee paid: _____

Date paid: _____

POLICE RESULTS

Approved _____

Denied: _____

Reason: _____

Date: _____