

HEMPFIELD TOWNSHIP
APPLICATION FOR PEDDLER'S LICENSE

Last Name:	First Name:	Middle Initial:
Street Address:	City:	State/Zip
Previous Criminal Record, if any:		
Name of Person/Company for Whom You Work:		
Company Street Address:	City:	State/Zip:
Immediate Supervisor's Last Name:		First Name
Supervisor's Work Phone:	Supervisor's Cell Phone:	Supervisor's E-mail:
Type of Goods, Wares, or Merchandise You Wish to Sale:		
Length of Time You Wish to be Licensed: Days:	Weeks	Years
Type of Vehicle to be Used:		
Vehicle Registration: State:	Vehicle Registration: License #:	Vehicle Color:
I hereby affirm that the above information is true and correct and the license shall be complied with in accordance with all applicable Township regulations.		
Signature of Applicant:		Application Date:
Code Officer Signature:	Permit No.:	Issue Date: