

Franklin Township
York County
150 Century Lane
Dillsburg, PA 17019
717-432-3773

twpsecretary@franklintownship.org

Hours: Monday – Friday 7:00 AM to 12:00 PM, 1:00 PM – 3:30 PM

APPLICATION FOR PEDDLING AND SOLICITING LICENSE

Township Ordinance 1988-1 provides that soliciting and peddling, as defined therein, may only be conducted upon issuance of a license by the Township. This application for a license shall be submitted to the Secretary of the Board of Supervisors. This application does not replace or eliminate any requirement for licensing at the county level; if such a county license is required, it must be provided to the Township as part of the application.

Full Name: _____ Phone #: _____

Local Address: _____

Permanent Address: _____

Email Address: _____

Name of Employer: _____

(State, if applicant is self-employed) _____

Nature of Goods, Wares, Services, or Merchandise: _____

Has the applicant ever been convicted of a crime? ____ YES ____ NO

If the applicant has been convicted of a crime, state the nature of any offense and any punishment imposed thereon: _____

Vehicle(s) – Type and License # _____

At the time of application, the Applicant shall furnish a photograph to be kept on file. No license shall be issued until the sum of \$15.00, for a license period of 30 days, or \$25.00, for an annual license by calendar year, shall be paid to the Township. A separate application and fee are required for each individual engaged in the soliciting and peddling, including employees and other agents. Licenses are non-transferable and shall be carried at all times when engaged in the licensed activity. Soliciting and peddling shall only be conducted between the hours of 9:00 AM – 8:00 PM. Applicants and Licenses shall comply with all the provisions set forth in Ordinance 1988-1 and are responsible for being familiar therewith. Required information exceeding the spaces provided above may be submitted by attaching supplemental sheets to this application.

VERIFICATION BY APPLICANT

I hereby acknowledge the terms of this application and verify that the statements made in this application and any attached documentation are true and correct to the best of my knowledge, information, and belief. I understand that false statements herein are made subject to the penalties of 19 Pa. § 4904, relating to unsworn falsification to authorities.

Date: _____ Signature: _____

--FOR TOWNSHIP USE ONLY--

DATE APPLICATION RECEIVED: _____

WAS LICENSE GRANTED? ____ YES ____ NO

REASON FOR DENIAL: _____

DATE LICENSE GRANTED: _____

TYPE OF LICENSE GRANTED: ____ 30 DAYS (\$15) ____ ANNUAL (\$25)

LICENSE #: _____