

HARMONY TOWNSHIP

Application for Peddler's & Solicitor's Permits

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Criminal Record: _____

Company: _____

Address: _____

City, State, Zip: _____

Type Merchandise: _____

Number of Days: _____

Date(s) to be in Township: _____

Type Vehicle You Are Driving: _____
YEAR MAKE MODEL

License Plate Number: _____

Description as Follows:

Height: _____ Weight: _____ Age: _____ Eyes: _____ Hair: _____

Date of Birth: _____ Social Security Number: _____

I hereby certify that the above information is true and correct.

Applicant's Signature: _____