



MIDDLE SMITHFIELD TOWNSHIP
147 MUNICIPAL DRIVE
EAST STROUDSBURG, PA 18302

570-223-8920

570-223-8935 FAX

APPLICATION FOR PEDDLERS OR TRANSIENT MERCHANT LICENSE

Applicant Name: _____

Mailing Address: _____

Phone Number: _____

Driver's License Number: _____ Birthdate: _____

**Attach copy of driver's license to application

Business Name: _____

Mailing Address: _____

Phone Number: _____

Have you or any persons selling with you or persons conducting or managing applicants business been convicted of a crime, misdemeanor or violation of any municipal ordinances?

YES NO If yes, please give particulars in connection with each incident on reverse.

Make of vehicle _____ Veh. License Plate _____

If there are others selling with you, we need the following information for each person; name, address, driver's license number, birthdate & place of birth. If additional space is needed, please use reverse side or additional papers.

What are you selling? _____

Where will you be selling? _____

(Transient Merchant needs to give exact location. Peddler means going door-to-door)

If Transient Merchant, do you have the permission of the property owner to sell at the above locations? _____ (yes/no)

How long do you propose to conduct business within the township? _____

Before a license can be issued, we must have your PA State Sales Tax License Number

I understand this license may be refused or revoked at any time for any of the following causes:

- a) Fraud, misrepresentation or false statement contained in the application for license.
- b) Fraud, misrepresentation or false statement made in the operation of a business.
- c) Any violation of the township.
- d) Conducting a business in an unlawful manner or in such manner as to constitute a breach of the peace or to constitute a menace to the health, morals, safety or welfare of the public.
- e) The failure or inability of any applicant to meet and satisfy the requirements and provisions of Chapter 140 of the Middle Smithfield Township code.

I hereby swear or affirm that I am authorized to make transactions for the firm or individual named; that I am at least eighteen years of age; that I am fully aware of the duties and obligations of persons engaged in the business indicated above and agree to comply with the State Laws, Township Code and such rules and regulations as may now or hereafter be in effect, relating to the operation of said business, and the statements contained in this application are true to the best of my knowledge and belief.

Signature

Date