



# Borough of Pottstown

Borough Hall, 100 East High Street  
Pottstown, Pennsylvania 19464-9525  
610-970-6520 fax 610-970-6599

## PERMIT FOR SOLICITING

APPLYING FOR: \_\_\_\_\_ Solicitor \_\_\_\_\_ Flyer/Pamphlet Distribution \_\_\_\_\_ Transient Retail Merchant

### Organization / Company Information

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Items or Service Being Solicited: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**\*MUST PROVIDE A CURRENT CERTIFICATE FROM HEALTH DEPARTMENT IF ANY TYPE OF FOOD IS BEING HANDLED \*\***

### Contact Information:

Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Address: \_\_\_\_\_

Number of years with Organization / Company \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Ht. \_\_\_\_\_ Wt. \_\_\_\_\_ Hair Color \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_ SS#: \_\_\_\_\_ Driver's License # \_\_\_\_\_

**HAVE YOU EVER BEEN ARRESTED?** ( ) YES ( ) NO If yes, explain \_\_\_\_\_

**\*\*Note: On 2<sup>nd</sup> page please list NAME, DOB, and SOCIAL SECURITY NUMBER for EACH INDIVIDUAL soliciting with the group.\*\***

**\*\*Note: Page 3 must be signed and dated by each individual\*\***

↓ **DO NOT WRITE BELOW THIS LINE** ↓

( ) **PERMIT ISSUED**

( ) **PERMIT DENIED**

Approved / Denied by: \_\_\_\_\_ Date: \_\_\_\_\_



**IN REFERENCE TO:**

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ Soc.Sec. # \_\_\_\_\_

**BUSINESS AND/OR PERSON REQUESTING INFORMATION:**

Company: \_\_\_\_\_ Borough of Pottstown \_\_\_\_\_ Phone: 610-970-6520

Address: \_\_\_\_\_ 100 E High St, Pottstown, PA 19464

Person Requesting Information: \_\_\_\_\_

Purpose of Records Check: \_\_\_\_\_ Permit for Soliciting

**AUTHORIZATION:**

I hereby authorize the above named Business/Person to do a Criminal Records Check on my background.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

**DO NOT WRITE BELOW THIS LINE ↓↓↓ -- OFFICIAL USE ONLY**

( ) No record of arrest with conviction.

( ) The following arrests and convictions:

DATE	CHARGES	DISPOSITION

Date: \_\_\_\_\_ Central Services Officer: \_\_\_\_\_