SOLICITATION / PEDDLING PERMIT APPLICATION

BOROUGH OF MUNHALL

1900 West Street • Munhall, PA 15120 • 412-464-7310

www.munhallpa.us

Name of Business or Organization: _____

Business or Organization address: _____

Telephone: _____ FAX: _____

Name of applicant: _____

Home address of applicant: _____

City: _____ State: _____ Zip: _____

Nature of Solictation/Peddling: _____

_____

_____

Date(s) and time(s) of Solicitation: _____

Location: _____

Name and address of person(s) who will be doing the soliciation/peddling:

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Attach additional pages if necessary

If a vehicle(s) is/are being used, list the description and license plate number of vehicle(s):

_____

_____

Solicitation is permitted from 9:00am to 5:pm only.

Fee for Solicitation permit is $75.00

Applicant Signature: _____ **Date**: _____

Permit Valid Date(s): _____

Fee Paid: _____ Date: _____

Authorized Signature: _____ Date: _____