

**CHARTIERS TOWNSHIP**  
**SOLICITATION PERMIT APPLICATION FORM**  
(Application Must Be Filed In Person)

☐ Applicant's First and Last Name \_\_\_\_\_

☐ Company Represented:

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_  
Address City State Zip

☐ Applicant must present a valid Driver's License or State Photo Identification Card.

☐ Physical Description for each solicitor: (Use additional sheets, if necessary)

Name \_\_\_\_\_ Height \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Name \_\_\_\_\_ Height \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Name \_\_\_\_\_ Height \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Name \_\_\_\_\_ Height \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Has any solicitor or canvasser been convicted of a crime other than a summary offense? If so, list the nature of the offense and punishment assessed. (Use additional sheets if necessary)

Name \_\_\_\_\_ Offense \_\_\_\_\_ Penalty \_\_\_\_\_

Name \_\_\_\_\_ Offense \_\_\_\_\_ Penalty \_\_\_\_\_

☐ Two (2) 2"X2" color photographs for each solicitor.

☐ Provide a PA State Police Criminal Background Checks for each applicant. If not a resident current background check, not older than one year, from state solicitor resides is required.

☐ Give a brief description of the nature of the business and the goods or services sold.

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**Hours: 10:00 AM – 4:00 PM Monday –Saturday No Sundays or Holidays**  
**All permittees are required to exhibit permit to any resident, police officer or designated official.**