

# TATAMY BOROUGH PEDDLERS LICENSE

required by Ordinance No. 236-2008

## HOURS FOR PEDDLING IN TATAMY BOROUGH ARE 10:00 A.M. UNTIL 6:00 P.M.

Fee: One Day \$10.<sup>00</sup> One Week \$25.<sup>00</sup> (Circle one) Cash Check Credit Card (Circle one) Date Paid: \_\_\_\_\_

Date(s) license issued for- Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Item(s) you will be Peddling: \_\_\_\_\_

Make of Car: \_\_\_\_\_ Car Model: \_\_\_\_\_ Car Year: \_\_\_\_\_

Plate Number: \_\_\_\_\_ State Issued: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_

Insurance Company Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

COI OR Wavier Form (Circle one)

Copies of Registration, Drivers License, and Insurance will be made by Tatamy Borough Office

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

If employing others, please list names, addresses, and contact numbers on the reverse side.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Tatamy will not allow licensees to annoy, harass or disrupt the citizens of Tatamy. If the citizen directs the licensee to leave the premises or fails to leave when the citizen expresses no desire in the product or is in any other way annoying, harassing, or disruptive this will be grounds to revoke the license and the Tatamy Borough Police will respond accordingly.

1. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_
2. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_
3. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_
4. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_
5. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_