

Borough of Conshohocken
1 West First Ave., Suite 200
Conshohocken, PA 19428
Phone (610) 828-1092 Fax (610) 828-0920

PEDDLING & SOLICITING LICENSE - \$100 PER MONTH

Name: _____

Sex: _____ Female _____ Male

Home Address: _____

Telephone: _____

Business Address: _____

Telephone: _____

Social Security # _____

Business ID #: _____

Sales Tax I.D. #: _____

Items/Foods to be Sold: _____

Montgomery Co. Vendor License #: _____

List Below the dates, times, number of days needed:

If using a vehicle, please list Make, Model and License #

A Certificate of Automobile Liability Coverage must be attached

_____ (2) recent 2" x 3" (minimum) Photographs of Applicant provided

Have you ever been convicted of a crime of any kind? _____ No _____ If Yes, please explain

Applicant agrees that they have received a copy of Ordinance Number 5 of 2007 and Resolution Number 6 of 2007 and that they agree to comply with the terms and conditions of the Ordinance. Applicant also agrees that they will comply with all other Ordinances of the Borough of Conshohocken including Ordinance Number 4 of 2005 concerning parking prohibitions.

SIGNED: _____ DATE _____