

**NORTH STRABANE TOWNSHIP  
BOARD OF SUPERVISORS  
1929 ROUTE 519, CANONSBURG, PENNSYLVANIA 15317  
724-745-8880**

**APPLICATION FOR PEDDLER'S LICENSE**

**TO THE SECRETARY, NORTH STRABANE TOWNSHIP:**

The undersigned hereby applies for a peddler's license for a period of \_\_\_\_\_  
day(s), week(s), month(s) for the sale, peddling, or canvassing of:

**PLACE OF SELLING:** \_\_\_\_\_  
**HOURS ARE 8:30 AM-8:00 PM DAILY. NO SALES, PEDDLING OR CANVASSING  
ARE PERMITTED ON SUNDAYS OR HOLIDAYS.**

**NAME:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ **SS#** \_\_\_\_\_  
**DRIVER LICENSE #** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_

**The Type of vehicle being used by me is:** \_\_\_\_\_

**Registered Owner's Name:** \_\_\_\_\_ **Registration #** \_\_\_\_\_  
**State:** \_\_\_\_\_

**My helpers or employees are as follows:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Criminal Record, if any:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**APPLICANT**

**License is not transferable.  
Separate license is required for each helper or peddler.**