BENSALEM TOWNSHIP Building and Planning Department Office 215-633-3644 • Fax 215-633-3753 2400 Byberry Road • Bensalem, PA 19020						
	Bucke County,		CATION DLER LICENS	Permit # Date Tax Parc		
To the best of his/her knowledge, the undersigned certifies that the information contained in this application is true and correct. The information is being furnished to make application for a license to solicit and/or peddle within the Township of Bensalem, and applicant agrees to abide by all regulations set forth in the Township Ordinance.						
1.	Applicant's Full Name:					
	Social Security No.					
	Applicant's Address					
	Phone No.					
2.	Applicant's Age:	Hair Colo	r:	Gender:	Male	
	Date of Birth:	Eye Color	· · · · · · · · · · · · · · · · · · ·		Female	
	Race:					
	Driver's License No.	State Wh	ere Issued:			
3.	 Has applicant ever been convicted or pleaded guilty to any crime? YES INO 					
	If Yes,					
	Crime	Date	of Conviction-Plea	Lo	cation	
4.	Name of Employer:					
	Address of Employer:					
	Employer's Phone No:					
	Employer is a : Corporation Partnership Individual Association					
5.	Name of company for whom you are soliciting?					
6.						
<u> </u>	Description of item for which you will be soliciting: (Service, Article, Device, Subscription, Contract, etc.)					
NOTE : Applicant is required to apply for a criminal records check through the Pennsylvania State Police. Copy and paste the link for the website to make this application. <u>https://epatch.state.pa.us</u>						
	Employer's Signature	Date	Applicant's	Signature	Date	
A SIGNED COPY OF THIS APPLICATION IS REQUIRED PRIOR TO ISSUANCE OF LICENSE						
OFFICE USE ONLY						
	Director of Building & Planning Date					