

ALLEGHENY TOWNSHIP
136 COMMUNITY BLDG. RD
LEECHBURG, PA 15656

SOLICITATION PERMIT APPLICATION

TODAY'S DATE: _____ DATE(S) OF SOLICITATION: _____

HOURS: _____

LOCATION(S): _____

APPLICANT NAME: _____ PHONE: _____

ADDRESS: _____

ORGANIZATION NAME: _____ PHONE: _____

ADDRESS: _____

REASON FOR SOLICITATION: _____

LIST VEHICLES INVOLVED:

MAKE

MODEL

COLOR

PLATE NUMBER

MAKE	MODEL	COLOR	PLATE NUMBER

LIST PEOPLE INVOLVED (Driver's license number or other identification required):

\$25 FEE _____ PAID (CASH/CHECK # _____) _____ WAIVED

By applying for this Application to Solicit in Allegheny Township, I hereby authorize Allegheny Township to collect information on criminal history and validity of the organization.

Signature of Applicant

*****FOR TOWNSHIP USE ONLY*****

APPROVED _____

DENIED _____

AUTHORIZED TOWNSHIP SIGNATURE _____