



HOPEWELL TOWNSHIP

POLICE DEPARTMENT



CHIEF OF POLICE
Donald E. Sedlacek

Session 216

1700 CLARK BLVD.
ALIQUIPPA, PA 15001
phone: 724.378.0557
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APPLICATION FOR SOLICITOR'S PERMIT

Name of Applicant _____

(Last)

(First)

(MI)

Present Address _____

Present Phone Number _____ How long have you lived at this address? _____

Company/Business you are representing _____

Company/Business Address _____

Company/Business Phone _____

Type of Merchandise/Goods/Services _____

Time associated with above firm: _____

Names of the three most recent cities/communities where you have solicited door to door: _____

DESCRIPTION OF APPLICANT

SSN: ____ - ____ - ____ DOB ____ / ____ / ____ Place of Birth _____ HT _____ WT _____

Eye Color _____ Hair Color _____

Have you ever been charged with a crime? Yes No If yes, date of incident _____

Location of arrest _____ Charge _____

Make of automobile to be used for solicitation _____ Model _____ Year _____

Color _____ License No. _____

Driver's License No. _____
(State) (Number)

Are any other vehicles going to be used? Yes No If yes, how many? _____

List Make, Model, Year, Color, License Plate of all vehicles to be used: _____

Applicant's Signature: _____

Date of Application: _____

APPROVED: _____
(Chief of Police)

Hopewell TWP Board of Commissioners
Manager-Secretary

"People Working Together To Build A Better Community"