

PERMIT FOR SOLICITING

Borough of Sugarcreek, Attn: Police Dept

212 Fox Street

Franklin, PA 16323

Phone: 814-437-3703

Fax: 814-437-2848

WITHIN THE BOROUGH OF SUGARCREEK A SEPARATE PERMIT REQUEST MUST BE FILLED OUT BY EACH PERSON INVOLVED IN THE SOLICITATION AS WELL AS \$25 FEE FOR EACH PERSON.

Permit Date: _____ Thru: December 31, _____

Name: _____ Maiden Name (if applicable): _____

Race: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Home Address (include City, State, Zip): _____

Local Address (include City, State, Zip): _____

Home Phone: _____ Business Phone: _____

License Plate # - State: _____ #: _____ Drivers License # - State: _____ #: _____

Business Name: _____ Location Soliciting: _____

Business Address (include City, State, Zip): _____

Nature of Business: _____

Credentials of employment: _____ How long employed: _____

Photo of applicant received (must be taken within 60 days prior to filing application) ☐Yes ☐No
(Failure to not have photo will cause delay til one is received)

Fingerprints of applicant (can be done at station providing officer availability): ☐Yes ☐No

Name of two reliable property owners of Venango County, PA to certify applicants good character and business responsibility, or in lieu of names, any other available evidence as to the good character and business responsibility of the applicant as will enable an investigator to properly evaluate such character and business responsibility.

Statement provided from applicant of whether or not the applicant has been convicted of any crime, misdemeanor or violation of any municipal ordinance, the nature of the offense and punishment or penalty assessed. ☐Yes ☐No

Copy of any printed contract, agreement, or order form used in the transaction, as well as any printed material advertising or describing the subject of the transaction received from applicant: ☐Yes ☐No

At the time of filing the application, a fee of \$25 dollars is required by each person, in form of cash or check to cover costs of processing and investigation.

PLEASE **READ CAREFULLY** AND SIGN IN THE PROPER SPACE IF APPLICABLE:

I, (SIGNATURE) _____ **HAVE NOT BEEN CONVICTED** OF A CRIME, FELONY, MISDEMEANOR OR VIOLATION OF ANY MUNICIPAL ORDINANCE. FURTHER, THROUGH MY SIGNATURE, I UNDERSTAND AND AUTHORIZE THAT A BACKGROUND CHECK BE COMPLETED BEFORE A PERMIT IS ISSUED. (**SEE CRIMINAL BACKGROUND CHECK FORM FOR INSTRUCTIONS**)

MUST BE SIGNED AND APPROVED BY THE CHIEF OF POLICE OR DELEGATE.

CHIEF OF POLICE, OR DELEGATE:

DATE: _____ PERMIT NUMBER: _____

PERMIT MUST BE VISIBLE TO THE PUBLIC AT ALL TIMES!!!!!!

PAID BY: ☐CASH ☐CHECK – CHECK # _____

ORDINANCE NO. 117 OF 1987 "SOLICITATION ORDINANCE"

SECTION 1.

(a) A peddler, canvasser or solicitor, as used in the Ordinance is defined as any person, whether resident of the Borough of Sugarcreek or not, traveling by foot, vehicle, or any type of conveyance from place to place, from house to house or from street to street offering and exposing for sale, making sales and delivery articles to purchasers, taking or attempting to take orders for sale of goods, wares and merchandise, personal property of any nature whatsoever for future delivery, or for services to be furnished or performed in the future, whether or not such person has, carries or exposes for sale a sample of the subject of such sale or whether he is collecting advance payments on such sales or not

SECTION 2.

No person shall engage in peddling, canvassing or soliciting in the Borough of Sugarcreek without first having taken out a license as herein provided.

SECTION 3.

Application: Applicants for permits and licenses under this ordinance must file with the Secretary a sworn application executed in duplicate on a form to be furnished by the Secretary which shall give the following information.

- (a) Name and description of applicant;
- (b) Address (legal and local);
- (c) A brief description of the nature of the business and the goods to be sold and in the case of products of farm or orchard, whether produced or grown by the applicant;
- (d) If employed, the name and address of the employer, together with credentials establishing the exact relationship;
- (e) The length of time for which the right to do business is desired;
- (f) If a vehicle is to be used, a description of the same, together with license number or other means of identification;
- (g) A photograph of the applicant taken within sixty (60) days immediately prior to the date of the filing of the application, which picture shall be two (2") inches by two (2") inches, showing the head and shoulders of the applicant in a clear, distinguishing manner;
- (h) Fingerprints of the applicant and the name of at least two reliable property owners of Venango County, Pennsylvania, who will certify as to the applicants good character and business responsibility, or in lieu of the names of references, any other available evidence as to the good character and business responsibility of the applicant as will enable an investigator to properly evaluate such character and business responsibility;
- (i) A statement as to whether or not the applicant has been convicted of any crime, misdemeanor or violation or any municipal ordinance, the nature of the offense and the punishment or penalty assessed therefor;
- (j) A copy of any printed contract; agreement, or order form used in the transaction, as well as any printed material advertising or describing the subject of the transaction;
- (k) At the time of filing the application, a fee of twenty-five (\$25.00) dollars shall be paid to the Secretary to cover the cost of processing and investigation.

SECTION 4.

- (b) If as a result of such investigation the applicant's character or business responsibility is found to be unsatisfactory, the Chief of Police shall endorse on such application his disapproval and his reasons for the same, and return said application to the Secretary, who shall notify the applicant that his application is disapproved and that no permit and license will be issued.
- (d) No license issued hereunder shall be transferable from one person to another.

SECTION 8.

Hours. No person licensed hereunder shall engage in peddling, canvassing or soliciting at anytime on Sunday, or upon any other day of the week before the hour of nine o'clock a.m. or after six o'clock p.m.

THIS ORDINANCE IS AVAILABLE IN ITS ENTIRETY AT:

<http://www.sugarcreekborough.us/documents/ordinance117.pdf>

TRY OUR WEBSITE FOR A QUICKER RESPONSE
<https://epatch.state.pa.us>

NAME/ REQUESTER	Sugarcreek Borough
ADDRESS	212 Fox Street
CITY/STATE/ ZIP CODE	Franklin, PA 16323

[illegible]

NAME/SUBJECT OF RECORD CHECK (FIRST)	(MIDDLE)	(LAST)		
MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	SEX	RACE

◀◀◀◀◀◀CHECK BOX THAT MOST APPLIES TO THE PURPOSE OF THIS REQUEST▶▶▶▶▶▶

<input type="checkbox"/> INTERNATIONAL ADOPTION - INTERNATIONAL ADOPTION MUST BE NOTARIZED.		
<input type="checkbox"/> ADOPTION (DOMESTIC) <input type="checkbox"/> ATTORNEY <input type="checkbox"/> BANKING <input type="checkbox"/> BAR ASSOCIATION <input type="checkbox"/> CHURCH <input type="checkbox"/> CHILD CARE <input type="checkbox"/> EDUCATION <input type="checkbox"/> ELDER CARE <input type="checkbox"/> EMERGENCY MANAGEMENT	<input type="checkbox"/> EMPLOYMENT/SCREENING <input type="checkbox"/> FOSTER CARE <input type="checkbox"/> HEALTHCARE <input type="checkbox"/> HOUSING <input type="checkbox"/> INSURANCE LICENSE <input type="checkbox"/> MENTAL HEALTH <input type="checkbox"/> NURSE AID TRAINING <input type="checkbox"/> OTHER _____	<input type="checkbox"/> PASSPORT <input type="checkbox"/> PRIVATE INVESTIGATIONS <input type="checkbox"/> SOCIAL SERVICES <input type="checkbox"/> TENANT CHECK <input type="checkbox"/> VISA <input type="checkbox"/> VOLUNTEER AMBULANCE/FIREFIGHTER <input type="checkbox"/> VOLUNTEER

☐ ACCESS & REVIEW - (NOT FOR EMPLOYMENT PURPOSES. MUST BE MAILED INTO THE CENTRAL REPOSITORY.)

AVAILABLE ONLY TO SUBJECT OF RECORD OR LEGAL REPRESENTATIVE WITH LEGAL AFFIDAVIT ATTACHED FOR THE PURPOSE OF REVIEWING YOUR CRIMINAL HISTORY.

FOR CENTRAL REPOSITORY USE ONLY
CONTROL NUMBER

AFTER COMPLETION MAIL TO:
PENNSYLVANIA STATE POLICE
CENTRAL REPOSITORY - 164
1800 ELMERTON AVENUE
HARRISBURG, PA 17110-9758

Local Number 717-425-5546
1-888-QUERYP (1-888-783-7972)

DO NOT SEND CASH OR PERSONAL
CHECK

CHECK ONE BLOCK

☐ **INDIVIDUAL/NONCRIMINAL JUSTICE AGENCY - ENCLOSE A CERTIFIED CHECK/MONEY ORDER IN THE AMOUNT OF \$10.00, PAYABLE TO:**
"COMMONWEALTH OF PENNSYLVANIA"
THE FEE IS NONREFUNDABLE

☐ **SEE EXEMPT/NONCRIMINAL JUSTICE AGENCY - NO FEE**