APPLICATION FOR TRANSIENT BUSINESS PERMIT
ARENDTSVILLE BOROUGH
ARENDTSVILLE, PA 17303

BUSINESS INFORMATION:

Name of Company: _____

Company Address: _____

Company Phone Number: _____

Goods/Services to be Provided: _____

Days and Hours of Operation: _____

PERSONAL INFORMATION:

Name of Applicant: _____

Home Address: _____

Telephone #: _____ Email Address: _____

Driver's License #: _____ State Issuing License: _____

Driving Record (Violations within Last 3 Years): _____

Prior Convictions (All Categories): _____

Make/Model/Color of Vehicle Used: _____

Vehicle License # / Expiration Date: _____

APPLYING FOR:

☐ _____ Days ($5/Day) ☐ 1 Year ($50)
(number)

I hereby acknowledge that the information I have provided above is true. In addition, I hereby acknowledge that I will abide by all Borough Ordinances (noise, littering, etc.) applicable to the conduct of my business.

_____ _____
(Applicant Signature) (Date)

_____
(Amount Received / Date)