



# INDEPENDENCE TOWNSHIP

## Beaver County

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### APPLICATION AND/OR REGISTRATION FOR CONDUCTING TRANSIENT RETAIL BUSINESS WITH INDEPENDENCE TOWNSHIP

Name	
Address	
Cell Phone	
Have you ever been convicted of a felony or a misdemeanor? If so, when and what was the nature of the offense?	
If not self-employed, please give the name, address and phone number of the person or organization by whom you are employed.	
What type of goods, wares or merchandise do you intend to sell?	
For what date/dates do you wish a license to be issued?	
If you will be using a vehicle, in whose name is the vehicle registered? What is the type and license number?	

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

Approved \_\_\_\_\_

Not Approved \_\_\_\_\_