

## Hazle Township Vendor Permit Application

Mail: PO Box 506 Harleigh, Pa. 18225  
P: 570-455-2030 Fax: 570-453-2402  
WEB: [www.hazletownship.com](http://www.hazletownship.com)

Drop Off: 101 West 27th Street Hazle Township Pa. 18202  
E-mail: [zoning@hazletownship.com](mailto:zoning@hazletownship.com)

V- \_\_\_\_ - \_\_\_\_

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Website: \_\_\_\_\_

FED EIN: \_\_\_\_\_

State Photo ID # \_\_\_\_\_

Applicant Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Purpose of Conducting a transient retail sale in Hazle Township:

\_\_\_\_\_  
(Specify Goods or Services to be offered or sold)

Sale will be conducted at:

\_\_\_\_\_  
(Location or Place of Sale)

Dates of Sale: From \_\_\_\_\_ to \_\_\_\_\_

Signature of Applicant:

\_\_\_\_\_

\*\*\*\*\*

This permit is granted for a period not to exceed \_\_\_\_\_ days from the date hereof, and will expire \_\_\_\_\_.

Receipt is hereby acknowledged for the sum of \$ \_\_\_\_\_.

Check # \_\_\_\_\_ VISA MC AMEX DISCOVER \_\_\_\_\_ (Fee of \$1.50 or 2.5% whichever is greater)

BY: \_\_\_\_\_

Date: \_\_\_\_\_

\*\*\*\*\*

Ordinance No. 96-12 duly adopted Dec. 9, 1996 and amended December 14, 2015 permit fee's are:

A.) \$5.00 per day not to exceed 7 days.

B.) \$50.00 not to exceed 30 days.

C.) \$85.00 not to exceed 1 year.

\*\* All applications shall be accompanied by state issued photo ID.

\*\* If peddling from a vehicle copies of all vehicles current registration and valid insurance are required.

\*\* Food and Beverage sales require a Mobile Food Vendor Permit.

\*\* Alcohol sales must meet Hazle Township zoning requirements and have a current PLCB license/authorization.