



Borough of Phoenixville  
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Phoenixville, PA 19460  
Phone (610) 933-8801 #312  
Fax (610) 935-0480  
[www.phoenixville.org](http://www.phoenixville.org)

**Peddler's Permit Application**

Applicant Full Name: \_\_\_\_\_

Applicant Date of Birth: \_\_\_\_\_ Male  Female

Applicant's Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_

Tax ID#: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Description of: \_\_\_\_\_  
(merchandise sold/service to be performed)

Days of the week: \_\_\_\_\_

Hours: \_\_\_\_\_

Type of Vehicle \_\_\_\_\_  
(Make, Model, Year)

\_\_\_\_\_  
(Vehicle License Number and expiration date)

\_\_\_\_\_  
(Operator's license number and expiration date)

