

# SLATINGTON POLICE DEPT.

125 S. Walnut Street, Slatington, Pa. 18080

Police Phone 437-5252

## TRANSIENT SOLICITORS PERMIT

APPLICATION DATE: \_\_\_\_\_

DATES OF PERMIT: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

HOME ADDRESS OF APPLICANT: \_\_\_\_\_

TELEPHONE NUMBER OF APPLICANT: \_\_\_\_\_

BUSINESS NAME AND ADDRESS (IF ANY): \_\_\_\_\_

BUSINESS TELEPHONE NUMBER: \_\_\_\_\_

NATURE OF WORK FOR WHICH APPLICATION IS SUBMITTED: \_\_\_\_\_

TYPE OF GOODS OR MERCHANDISE TO BE SOLD: \_\_\_\_\_

NUMBER OF PEOPLE SOLICITING: \_\_\_\_\_

IF A VEHICLE(S) ARE BEING USED:

VEHICLE REGISTRATION AND DESCRIPTION: \_\_\_\_\_

OPERATORS LICENSE NUMBER: \_\_\_\_\_

HAS THE APPLICANT OR ANY ASSISTANTS EVER BEEN CONVICTED OF A CRIME?  
(OTHER THAN A SUMMARY MOTOR VEHICLE OFFENSE)      YES      NO

IF YES, OF WHAT CRIME OR CRIMES? \_\_\_\_\_

I HEREBY MAKE APPLICATION FOR A LICENSE AS REQUIRED BY ORDINANCE NUMBER 301 OF THE BOROUGH OF SLATINGTON AND DO HEREBY STATE THAT ALL OF THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND CORRECT. I DO FURTHER AGREE TO COMPLY WITH ALL OF THE PROVISIONS OF THE ORDINANCE.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
ISSUING AUTHORITY

\_\_\_\_\_  
PERMIT FEE

\$25.00 PER DAY OR FRACTION THEREOF

APPLICATION FOR STREET OCCUPANCY PERMIT

ORDINANCE NO. 472

BOROUGH OF SLATINGTON  
LEHIGH COUNTY, PENNSYLVANIA

DATE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

STREET NAME AND LOCATION OF WORK: \_\_\_\_\_

APPLICANT HEREBY PROPOSES TO: \_\_\_\_\_  
(Give brief and comprehensive description of proposed work)

If emergency repair: (Emergency Permit Card No. \_\_\_\_\_; Entry No. \_\_\_\_\_)

Date authorized to begin work: \_\_\_\_\_; Approximate Completion Date: \_\_\_\_\_

Permit Expiration Date: \_\_\_\_\_

The undersigned applicant (hereinafter referred to as the "Applicant") acknowledges receipt of a copy of Ordinance No. 472 of the Borough of Slatington (hereinafter referred to as the "Borough") pursuant to which the within application is being filed. Applicant agrees to comply with all applicable provisions of Ordinance No. 472. Without limiting the foregoing, Applicant hereby agrees to indemnify and save harmless and defend the Borough of Slatington of and from all liability referred to and described in Section 6K of the aforesaid Ordinance No. 472.

This permit expires one (1) year from date of permit approval. In the event of failure or neglect by the Applicant to perform and comply with the permit or the regulations set forth in the aforesaid Ordinance No. 472, Applicant acknowledges that the Borough may immediately revoke and annul the permit and order and direct the Applicant to remove any or all structures, equipment or property belonging to the Applicant and/or its contractors from the legal limits of the right-of-way and to restore the right-of-way to its former condition. In the event the Applicant violates any provision of the aforesaid Ordinance No. 472, the Borough shall have the right to enforce the provisions of the aforesaid Ordinance as provided for therein or as otherwise provided by law. In this respect, and without limiting the foregoing, in the event the Borough determines that such structures, equipment or property pose a threat to the public safety and the Applicant fails to remove the same after notice from the Borough to do so, any attorney of any court of record shall be authorized to appear for the Applicant, and to enter an amicable action of ejectment and confess judgment against the Applicant, and the prothonotary shall be authorized to issue forthwith a writ of possession with costs, without leave of court.

OFFICIAL USE ONLY

1. Permit Filing Fee: \_\_\_\_\_ Blasting (will) (will not) be required  
Blasting Bond No. \_\_\_\_\_  
Amount of Bond \$ \_\_\_\_\_
  2. General Inspection Fee: \_\_\_\_\_ Additional inspection (will) (will not) be required.
  3. Additional Inspection Fee: \_\_\_\_\_
- Work to be restored by (Applicant) (Borough) Type restoration required: \_\_\_\_\_
4. Amount of restoration required: \_\_\_\_\_ SY @ \$ \_\_\_\_\_ /S.Y. = \$ \_\_\_\_\_  
Restoration Fee Deposit: \$ \_\_\_\_\_ (if bond supplied, double amount)  
Insurance Certificate Received \_\_\_\_\_
  5. Total - Items 1 through 4: \$ \_\_\_\_\_ Total Fee Received \_\_\_\_\_ Check No. \_\_\_\_\_

This application shall become the permit upon approval of the Borough of Slatington.

APPROVED: \_\_\_\_\_ (Date) APPLICANT: \_\_\_\_\_  
Borough Supervisor  
Borough Secretary