

**RICHLAND TOWNSHIP
BUCKS COUNTY, PENNSYLVANIA**

RESOLUTION # 09 – 34

**A RESOLUTION SETTING THE FEE TO BE CHARGED TO
APPLICANTS FOR A TRANSIENT MERCHANT LICENSE**

WHEREAS, Richland Township has enacted Ordinance No. 242 known as the Richland Township Transient Merchant Ordinance; and

WHEREAS, the Richland Township Transient Merchant Ordinance calls for the Richland Township Board of Supervisors to set permit fees for transient merchant licenses from time to time by resolution.

NOW THEREFORE, BE IT RESOLVED that the Board of Supervisors of Richland Township, Bucks County, Pennsylvania hereby establishes the license fee for each person wishing to engage in transient merchant activities within Richland Township at Fifty (\$50.00) Dollars per person.

RESOLVED AND ADOPTED this 28th day of September, 2009.

**RICHLAND TOWNSHIP
BOARD OF SUPERVISORS**

ATTEST:

RICHLAND TOWNSHIP TRANSIENT MERCHANT APPLICATION

Name _____
(Last) (First) (Middle)

Permanent Home Address _____
(Street) (City) (State) (Zip)

Landline Number _____ - _____ - _____ Cellular Number _____ - _____ - _____

Local Address _____
(Street) (City) (State) (Zip)

Landline Number _____ - _____ - _____ Cellular Number _____ - _____ - _____

Last (4) Digits of Social Security Number _____ Age _____ Birthdate ____/____/_____

Height _____ Weight _____ Race _____ Sex _____ Hair Color _____ Eye Color _____

Provide two (2) passport style photographs of the applicant, taken within sixty (60) days immediately prior to the date of filing the application, showing the head and shoulders of the applicant.

Driver's License No. _____ Date Issued ____/____/_____

Make of Car _____ Year _____ License # _____ State _____

Provide the names of two (2) reliable persons who will certify as to the applicant's good character and business reputation, or in lieu of names of such references, such other available evidence as to the good character and business reputation of the applicant as will enable an investigator to properly evaluate the applicant's character.

Name _____ Phone Number _____ - _____ - _____

Name _____ Phone Number _____ - _____ - _____

Name of Employer _____ Phone Number _____ - _____ - _____
Address of Employer _____
(Street) (City) (State) (Zip)

Describe the nature of goods of transient merchant activities _____

Start Date ____/____/_____ Closing Date ____/____/_____ (License valid for maximum 90 days)

Do you have any current criminal charges or active warrants pending against you? Yes () No ()

Have you ever been convicted or plead guilty to any misdemeanor or felony offense? Yes () No ()

If yes, date: ___/___/_____ Place _____

Charges _____

Disposition _____

I DO SOLEMLY SWEAR THAT THE ANSWERS GIVEN HERIN HAVE BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE ARE TRUE, CORRECT, AND COMPLETE. BY SIGNING THIS APPLICATION, THE APPLICANT AUTHORIZES THE RICHLAND TOWNSHIP CHIEF OF POLICE, OR AUTHORIZED REPRESENTATIVE, TO INVESTIGATE THE APPLICANT'S CRIMINAL HISTORY, ACTIVE WARRANT STATUS, AND BACKGROUND. I ALSO ACKNOWLEDGE RECEIPT OF A COPY OF THE RICHLAND TOWNSHIP TRANSIENT MERCHANT ORDINANCE.

Signature _____ Date ___/___/_____

.....
FOR OFFICE USE ONLY

Police Chief _____ Date ___/___/_____ Approved () Permit Fee _____

Disapproved ()

Reason for Disapproval _____