

**The City of York
Pennsylvania**

Honorable Michael Ray Helfrich, Mayor



Economic and Community Development

101 South George Street
York, PA 17401
www.yorkcity.org

APPLICATION FOR PEDDLER & SOLICITOR REGISTRATION

PLEASE NOTE THE FOLLOWING:

1. All applicable personal information required below shall be provided for every person that is registering.
2. An individual registration card shall be required for each helper and must be carried at all times.
3. No registration card shall be transferable from one person to another.
4. You cannot sell/solicit before 8:00 a.m. or after 9:00 p.m.
5. You cannot sell at a fixed location—**YOU MUST KEEP MOVING!!**
6. You cannot sell in the Central Business District (two blocks around the square in all directions).
7. This registration does not include the right to sell at "Special Events."
8. This registration expires on December 31st of every year.
9. This registration does not permit the sale of food products.

DATE RECEIVED

REGISTRATION CARD
NUMBER

SELECT ONE:

Profit Making Registrants
Yearly Registration Fee: \$40.00 plus \$5.00 Per Additional Employee

Non-profit Charitable, Religious or Public Organization
No Yearly Registration Fee (Must provide non-profit registration from the State—copy to be attached)

Are you registered with the York/Adams Tax Bureau? Yes No

Number of employees (solicitors):

APPLICANT NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

ATTACH A COPY OF THE APPLICANT'S DRIVER'S LICENSE OR PHOTO ID

COMPANY NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

SUPERVISOR'S NAME: _____ PHONE NUMBER: _____

DESCRIPTION OF GOODS, WARES, SERVICES OR MERCHANDISE OFFERED FOR SALE: _____

VEHICLE INFORMATION: _____

MAKE MODEL YEAR PLATE NUMBER/STATE

You will receive a Registration Card. This card does not endorse or sanction the activity of the bearer, and is not transferable.

YOU ARE HEREBY NOTIFIED THAT ANY FALSE INFORMATION PROVIDED ON THIS FORM IS A MISDEMEANOR OF THE 2ND DEGREE AND PUNISHABLE PER THE PENNSYLVANIA CRIMES CODE, 18 PS §4911

APPLICANT SIGNATURE: _____

DATE: _____