



101 Commerce Drive
Exton, Pennsylvania 19341

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www.westwhiteland.org

SOLICITOR'S LICENSE APPLICATION FORM

APPLICANT INFORMATION			
Name:			
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Place of Birth:		Country:	
Driver's License/State ID Number:			
Please complete information for your ID card:			
Height:	Weight:	Hair Color:	Eye Color: Race:
EMPLOYMENT INFORMATION			
Current employer:			
Employer address:			
City:	State:	ZIP Code:	
Phone:	Fax:	Type of Business:	
Previous employer:			
Address:			
City:	State:	ZIP Code:	
Phone:	E-mail:	How long?	
Position:			
Emergency Contact's Name:			
Address:		Phone:	
City:	State:	ZIP Code:	
Relationship:			
VEHICLE INFORMATION, IF APPLICABLE			
MAKE/MODEL:			
YEAR:	COLOR:	LICENSE #:	
Have you ever been convicted in any jurisdiction of any crime other than minor traffic violations and, if so, please describe:			
<i>Applicant must submit application in person to the West Whiteland Township Police Department with a fee of \$75</i> (Annual Renewal fee \$50), along with a completed criminal background check by PSP and a completed fingerprint card from the Sheriff's Office. Fee payable by cash or check to <i>West Whiteland Township</i> .			
I authorize West Whiteland Township Police Department to verify the information provided on this form as to my Employment history. I also consent to a Criminal History Check to be completed by the department.			
Applicant's Signature:		Date:	
Township Administrator Signature:			
<i>Do Not Write Below this Line – For Police Department Use Only</i>			
If permit is not issued pursuant to Section 6, Ordinance No. 22, indicate reason:			