

**TRANSIENT MERCHANT LICENSE-RICHLAND TOWNSHIP
322 SCHOOLHOUSE ROAD, SUITE 110
JOHNSTOWN, PA 15904
(814) 266-2922 FAX (814) 266-2024**

NO. _____

I, _____ hereby certify that the information is true and correct.

Name

1. Full Name of Business Telephone Number

2. Street City State Zip Code

3. Nature of Goods, Wares or Merchandise Offered For Sale

4. Location Of Sale Property Owner's Name

5. First Date of Sale Last Date of Sale

Signature of Applicant Date

Amount Due: \$10.00 for up to 10 days \$25.00 for up to 30 days

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**PERMIT FOR TRANSIENT MERCHANT
RICHLAND TOWNSHIP
322 SCHOOLHOUSE ROAD, SUITE 110
JOHNSTOWN, PA 15904**

No. _____

This is to certify that _____ representing _____ has been duly issued this said license in accordance with the Ordinance requiring same in the Township of Richland.

Date of Sale: _____

Last Day of Sale: _____

Location: _____

Township Seal

Signature of Issuing Authority

THIS PERMIT MUST BE VISIBLY DISPLAYED