

BOROUGH OF SAXONBURG

420 West Main Street
Saxonburg, PA 16056
Phone: 724-352-1400
Fax: 724-352-8820
www.saxonburgpa.com



Solicitation Permit Application 2020

Please allow 48 hours for processing from the time received. You will need an Approval Confirmation prior to selling.

Name: _____ Address: _____
Email: _____ Phone _____ Driver's License _____
Type of Goods/Services to be Sold: _____
Make & Year of Vehicle to be Used: _____ License Plate #: _____
Dates of Permit (permit cost is \$15 per day): _____
Food Vendors: PA Ag # _____ Insurance Certificate Holder Number _____
Preferred Vending Location: Roebing Park Other (please specify): _____

Social Distancing Plans to Keep Yourself and Your Customers Safe

1. Seller will wear a mask YES NO
2. Customers will need to wear masks be served YES NO
3. How will customers know to line up 6' apart? Ground Stakes Chalk lines Flags Cones
Other (describe): _____
Be sure to remove all markings/items as part of your tear-down process
4. Please describe payment process & delivery of purchased goods while maintaining 6' from customers
(ex: payment picked up via long-reach basket/bagged food delivered on end of hockey stick):
Payment _____
Delivery _____
5. Other plans _____

How would you like to receive your Approval Confirmation? Via Email Via Phone

I hereby authorize Saxonburg Borough Police Department to perform a search for any and all criminal history about myself, for purposes of issuing this permit.

_____ Date _____
Applicant Signature

Please include the Permit Fee of \$15 (per day) with this application via Cash, or Check made payable to "Saxonburg Borough"

For Borough Use Only: Received Time & Date: _____ Initialed _____
Fee Paid: _____ Check #: _____ Cash: _____
Date permit copy provided to Borough Police Department _____

Approved by (name and title): _____ Date & Time _____