Date Application Received: _____ Permit #: _____

Application Taken By: _____

Transient Retail Business License Application
Borough of Mercersburg
Franklin County, Pennsylvania 17236
Phone: 717-328-3116

Fee:
$26 per application
$15 refund if application is denied

Part 1 – TO BE COMPLETED BY APPLICANT (please print)

Business	
Applicant Name:	
Business Name:	
Business Address:	
EIN #:	
Business Phone:	
Business E-mail:	

Representative #1	
Representative Name:	
Driver's License #:	
Mobile Phone:	

Representative #2	
Representative Name:	
Driver's License #:	
Mobile Phone:	

Representative #3	
Representative Name:	
Driver's License #:	
Mobile Phone:	

Length of time (not to exceed 1 year) during which applicant intends to conduct transient retail sales in the Borough.

Start Date: ____/_____/_____ to finish date: ____/_____/_____

Applicant Signature _____

(Reference Ordinance 10-4)

Part 2 – TO BE COMPLETED BY BOROUGH (please print)

Application Approved: YES ☐ DENIED ☐ Date Issued _____

Reason for Denial:

_____

_____

Borough Representative Signature: _____ Date: _____

Borough Representative Printed: _____

(Reference Ordinance 10-4)