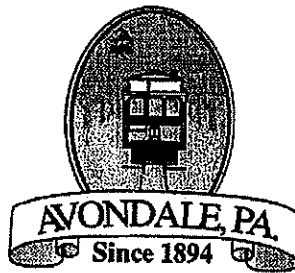


BOROUGH OF AVONDALE
110 Pomeroy Avenue
P.O. Box 247
Avondale, PA 19311



Phone: 610-268-8501
Fax: 610-268-8205

VENDORS PERMIT

NAME: _____

DATE: _____

ADDRESS: _____

ARE YOU THE PROPERTY OWNER? Yes _____ No _____ IF NOT WRITTEN PERMISSION
FROM THE PROPERTY OWNER IS REQUIRED

PHONE NUMBER: _____

TYPE OF BUSINESS: _____

CERTIFICATE OF LIABILITY INSURANCE Yes _____ No _____

PERMIT GOOD FROM _____ TO _____

PERMIT ISSUED BY: _____ DATE: _____

PERMIT FEE \$ _____

PLEASE SUBMIT PLANS IF VENDOR IS STATIONARY