

**CHELTENHAM TOWNSHIP, 8230 OLD YORK ROAD, ELKINS PARK, PA. 19027, (215)-887-1000
MERCANTILE/BUSINESS PRIVILEGE LICENSE APPLICATION FORM**

TAX YEAR _____

TAX LICENSE NUMBER _____

MAILING NAME AND ADDRESS

NAME AND LOCATION OF BUSINESS IN CHELTENHAM

NO AUTHORITY IS GIVEN BY ISSUANCE OF THE LICENSE/PERMIT FOR ANY ACTIVITY FORBIDDEN BY ZONING REGULATIONS OR LAW.

PLEASE CORRECT ANY ERROR IN NAME OR ADDRESS.

The following information is necessary for our records and will be held in the strictest confidence. ALL QUESTIONS MUST BE ANSWERED FULLY. Return the completed application to the ACCOUNTING DEPARTMENT with a check payable to Cheltenham Township for the total of all licenses you require for each year the business has been in operation in the Township. License fee is \$10.00 per year for each license category you use in your business (see "Nature of Business" below for help in determining the licenses you require).

SEPARATE LICENSE NECESSARY FOR EACH PLACE OF BUSINESS. NOTE: License must be posted conspicuously at all times. New business must secure license before commencing business.

1. BUSINESS PHONE NO. _____ 2. EMERGENCY PHONE NO. _____ 3. FEDERAL EIN NO. OR SOCIAL SECURITY NO. _____

4. ARE YOU A RENTOR AT THIS BUSINESS LOCATION?
IF SO, PROVIDE NAME & ADDRESS OF RENTAL LEASING AGENT OR OWNER

5. NAMES OF OWNERS, PARTNERS OFFICERS	ADDRESS	TITLE

6. ATTACH A LIST OF ALL CONCESSIONAIRES AND COMMERCIAL OR INDUSTRIAL TENANTS ON YOUR PREMISES.

7. TYPE OF ORGANIZATION

ASSOCIATION INDIVIDUAL PROPRIETORSHIP PARTNERSHIP CORPORATION

FIDUCIARY DATE INCORPORATED _____ STATE _____

8. NATURE OF BUSINESS (\$10 EACH CATEGORY)

RETAIL WHOLESALE RENTAL RESTAURANT

SERVICE CONSTRUCTION TRADE OTHER (EXPLAIN)

9. BRIEF DESCRIPTION OF BUSINESS ACTIVITY

10. DATE LOCAL OPERATION BEGAN _____ 11. TYPE OF BUSINESS ESTABLISHED NEW _____ 12. NUMBER OF EMPLOYEES _____

13. NAME AND ADDRESS OF PERSON OR FIRM IN CHARGE OF RECORDS

<p>CERTIFICATION</p> <p>I HEREBY CERTIFY UNDER PENALTIES PROVIDED BY LAW THAT ALL STATEMENTS MADE HEREON ARE, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT, AND COMPLETE.</p>

PRINT NAME _____

_____/_____/_____
DATE

SIGNATURE _____

TITLE