

**BOROUGH OF OAKDALE**

**ALLEGHENY COUNTY**

**104 SEMINARY AVENUE**

**OAKDALE, PA 15071**

**724-693-9740**

**SOLICITOR'S AND VENDORS PERMIT**

NAME OF BUSINESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

CONTACT \_\_\_\_\_

CONTACT PHONE \_\_\_\_\_

DRIVER'S LICENSE NO# \_\_\_\_\_

MAKE, MODEL, YEAR OF VEHICLE \_\_\_\_\_

SOLICITATION OR VENDING OF:

\_\_\_\_\_

\_\_\_\_\_

**FEE - \$100 PER PERSON PER YEAR**

**ISSUE DATE** \_\_\_\_\_

**EXPIRATION DATE** \_\_\_\_\_

**BOROUGH AUTHORIZATION SIGNATURE** \_\_\_\_\_