

BOROUGH OF EVERETT

Municipal Building
100 Mechanic Street
Everett, Pennsylvania 15537
Telephone 814-652-9202

Transient Retail License Application (Door to Door) \$25 per day

Date of Application: _____

Name of Applicant: _____ Business Name: _____

Applicant's Telephone Number: _____ Sponsor: _____

Applicant's Date of Birth: _____ Driver's License #: _____ State: _____

Make/Model/Year of Vehicle: _____ License # _____

Criminal Record: Yes or No Explain if Yes: _____

Employer Name: _____

Employer Address: _____

Email Address: _____

Type of Goods, Wares & Merchandise to be sold: _____

If Applicable: Retail License #: _____

If Applicable: Food Sales Health Inspection Provided: Yes or No

Number of Days: _____

Dates Requested: _____

Time Frame: _____

*If Applicable: COPY OF THE STATE HEALTH CERTIFICATE UNDER RETAIL FOOD FACILITY SAFETY ACT 3 Pa.C.S.A. §5701-5714
(or other applicable statutes) MUST ACCOMPANY THIS APPLICATION.*

Date Health Certificate Received: _____ Amount Paid: _____
cash
ck# _____
credit

Proof of Liability Insurance Provided: Yes or No Per Day (\$25) # of days _____

Date Permit Issued: _____ License # _____

Signature of Borough Official: _____ Date: _____
dev. 10/07/25