

**APPLICATION FOR DISTRIBUTION OF HANDBILLS**

**BOROUGH OF WASHINGTON**

Firm or Business Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Owner's Name \_\_\_\_\_

Phone \_\_\_\_\_

**PERSONS CONDUCTING DISTRIBUTION**

Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

DATE OF DISTRIBUTION \_\_\_\_\_

I/We have received a copy of Chapter 49 of the Code of the Borough of Washington concerning Handbills. I/We agree to comply with all regulations set forth in Chapter 49 of the Code of the Borough of Washington and understand that I/We could be issued a summons for any violation of any Section or Sub-Section.

Business Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Distributor Signature \_\_\_\_\_ Date \_\_\_\_\_

Distributor Signature \_\_\_\_\_ Date \_\_\_\_\_

Fee: \$5.00

Approved By: \_\_\_\_\_