

**UPPER DARBY TOWNSHIP
MERCANTILE LICENSE APPLICATION
2008**

Application is hereby made for a Mercantile License for the year 2008, as required by Ordinance No. 2297 dated December 19, 1972.

ACCOUNT NUMBER

_____ AS SHOWN ON COVER LETTER

PHYSICAL LOCATION OF BUSINESS

Name _____
Address _____
City State Zip _____
Phone () -

DESIRED MAILING ADDRESS FOR BILLINGS IF DIFFERENT FROM ABOVE

Name _____
Address _____
City State Zip _____
Phone () -

OWNERS INFORMATION

Name _____
Address _____
City State Zip _____
Phone () -

For additional owners use reverse side of this form.

Nature of Business _____

Name and address of any other business conducted by you in Upper Darby Township

Type of License required: () Retail Dealer \$15.00
 () Wholesale Dealer \$15.00
 () Wholesale & Retail Dealer..... \$25.00

If you currently hold an active Business Privilege License, no Mercantile License is required.

Signature of Preparer _____

Title _____ Date _____