

CONTRACTOR'S



APPLICATION FOR BUSINESS PRIVILEGE LICENSE **TOWNSHIP OF SPRINGFIELD, DELAWARE COUNTY PA**

Application is hereby made for BUSINESS PRIVILEGE LICENSE for the year 2019

1. Name, address and phone no. under which business is conducted:

2. Check whether business is () Incorporated; () Partnership; () Individual

3. Name(s), address(es) and phone no. of true owner(s):

4. Nature of business (describe fully)

5. Give name and address of any other place of business conducted by you in the Township of Springfield:

6. A fee of \$50.00 must accompany this application which should be returned as soon as possible to: Springfield Township, Business Tax Office, 50 Powell Road, Springfield, PA 19064.

Please make check payable to Springfield Township

Name of Applicant _____

(By) _____

Date _____