



LICENSE APPLICATION NEWSSTAND, VENDOR, ETC.

Follow Instructions listed on Instruction Sheet
For further information call (215) 686-8686

WHEN COMPLETED, MAIL TO:

DEPARTMENT OF LICENSES AND INSPECTIONS
CUSTOMER CARE UNIT, PUBLIC SERVICE CONCOURSE
1401 JOHN F. KENNEDY BOULEVARD
PHILADELPHIA, PA 19102-1687

USE A SINGLE CHECK OR MONEY ORDER FOR ALL FEES,
PAYABLE TO "CITY OF PHILADELPHIA"

1. NAME OF OWNER		2. BUSINESS NAME	
3. LOCATION OF NEWSSTAND			ZIP CODE
4. DAYTIME TELEPHONE NUMBER	EVENING TELEPHONE NUMBER	FAX NUMBER	EMAIL ADDRESS
5. BILLING ADDRESS		CITY	STATE ZIP CODE
6. BUSINESS INCOME AND RECEIPTS TAX NUMBER	7. COMMERCIAL ACTIVITY LICENSE NUMBER		8. DATE ACTIVITY STARTED (MONTH/DAY/YEAR)
9. DESCRIPTION OF ACTIVITY/BUSINESS (KINDS OF GOODS TO BE SOLD)			
10. DESCRIPTION OF VEHICLE/STAND, ETC.			
11. DESCRIPTION OF APPLICANT (ALSO ATTACH TWO RECENT PHOTOGRAPHS)			

12. LICENSE TYPE	FEE	REV. CODE	EXPIRATION DATE	LICENSE NUMBER
<input type="checkbox"/> FOOD ESTABLISHMENT (RETAIL, NON-PERM.)	\$ 150.00	3112	APRIL 30	
<input type="checkbox"/> NEWSSTAND LICENSE	\$ 300.00	3414	MARCH 31	
<input type="checkbox"/> SIDEWALK SALES x (_____ LIC. @ \$ 300.00 EACH)	\$ 0.00	3281	DECEMBER 31	
<input type="checkbox"/> VENDOR, FOOT x (_____ LIC. @ \$ 300.00 EACH)	\$ 0.00	3278	DECEMBER 31	
<input type="checkbox"/> VENDOR, MOTOR VEHICLE x (_____ LIC. @ \$ 300.00 EACH)	\$ 0.00	3279	DECEMBER 31	
<input type="checkbox"/> VENDOR, PUSHCART x (_____ @ \$ 300.00 EACH)	\$ 0.00	3279	DECEMBER 31	
<input type="checkbox"/> SCALES AND SCANNERS	\$ 25.00	3822	SEPTEMBER 30	
<input type="checkbox"/>				

TOTAL FEES..... \$ _____

☐ CHECK IF HEALTH APPROVAL ATTACHED

☐ CHECK IF PHOTOGRAPHS ATTACHED

13. OWNER, CORPORATION, AND PARTNERSHIP (LIST THREE PRINCIPALS OR PARTNERS)

NAME OF PRINCIPAL OR PARTNER	TITLE	HOME ADDRESS (INCLUDE CITY, STATE, & ZIP CODE; P.O. BOX NOT ACCEPTABLE)

BE SURE TO READ OTHER SIDE AND COMPLETE WHERE NECESSARY

14. APPLICANT CERTIFICATION

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to the possible revocation of any licenses as a result of my false application, and such other penalties as may be prescribed by law.

Applicant Signature _____

Date _____

15. NEWSSTAND

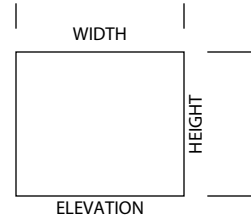
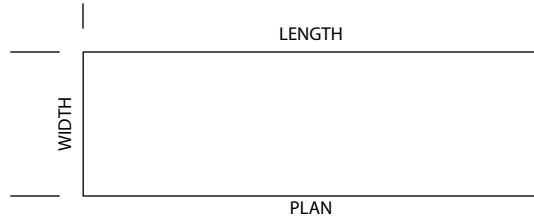
☐ EXISTING NEWSSTAND

☐ NEW NEWSSTAND

Newsstand shall not exceed 4 ft. wide x 8 ft. in length and 8 ft. in height; must be located not less than eighteen inches inside the curb line; must be clear of the full width of the sidewalk on the intersecting street and in no case extend past the point of curve of the radius corner.

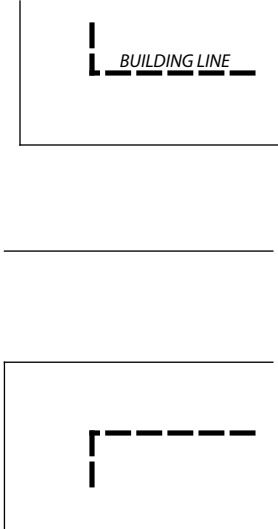
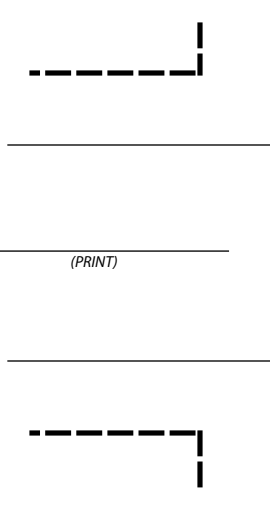
INDICATE DIMENSIONS

SQUARE FEET: _____
(LENGTH x WIDTH)

**STAND LOCATION****SHOW THE FOLLOWING:**

1. Location of stand
2. Distance from building line to curb line
3. Fire hydrant, street poles, transit shelters, street name poles, or any other obstruction

STREET NAME: _____
(PRINT)

**NOTE:**

Newsstand license permits only sale of:

1. Newspapers
2. Periodicals
3. Paperbound Books
4. State Lottery Tickets
5. Wrapped Candy
6. Tobacco Products
7. Magazines

THE SALE OF ANY OTHER ITEM(S) MAY RESULT IN THE IMMEDIATE REVOCATION OF ANY LICENSES.



The Licensee hereby agrees to operate Newsstand in accordance with the Philadelphia Code and the Regulations adopted thereunder.

LICENSEE SIGNATURE

OFFICE USE ONLY

PREREQUISITES (LIST THOSE CHECKED DURING PROCESSING)

REMARKS:

STREET CODE _____

☐ APPROVED

☐ REFUSED

STREETS _____

REVIEWED BY

NUMBER

DATE

AUDIT