NEW GARDEN TOWNSHIP
CHESTER COUNTY, PENNSYLVANIA
APPLICATION FOR PERMIT
(flea market, fair, circus, miscellaneous activities)

1. Owner's Name and Address: _____
_____
Telephone Numbers: (  ) _____; (  ) _____

2. Operator's Name and Address: _____
_____
Telephone Numbers: (  ) _____; (  ) _____

3. Location of Property: _____
_____
Tax Parcel No: _____ Size of Lot: _____

4. Permit Requested to: (define activity)_____
_____

5. Specify all locations of temporary or other facilities, tents, stands, etc., all parking areas and traffic control: _____
_____
_____

6. Duration of activity: (dates) _____

7. Water and/or sewer provided (if so, please specify): _____
_____

8. Insurance Coverage: _____ Company: _____ Amount: _____

I (we) agree to conduct the aforesaid activities in accordance with the facts set forth herein and in accordance with all ordinances and regulations of New Garden Township.

_____
Owner

_____
Operator

The above premises is hereby approved/ denied for use and occupancy as aforesaid.

BY: _____

Permit No: _____ Duration of Permit: _____ Fee Paid ($25.00): _____