



BOROUGH OF COLLINGDALE

Delaware County, Pennsylvania

Municipal Building

800 MacDade Blvd.
Collingdale, PA 19023-8524
610-586-0500
Fax: 610-586-9065

APPLICATION FOR USE & OCCUPANCY LICENSE BUSINESS USAGE

Business Name & Address

Name: _____
Address: _____
City: _____
State: _____ Zip: _____ Phone: _____

(All of the above items must be completed)

Owner's Name & Address

Name: _____
Address: _____
City: _____
State: _____ Zip: _____ Phone: _____

(All of the above items must be completed)

Type of Business: _____

Number of Employees: _____

Hours of Operation: _____

Description of Business Operation: _____

To the best of my knowledge the information contained in this application is true and correct as testified to by my signature on this document.

Signature