

**PEDDLING &
SOLICITING PERMIT
AFFIDAVIT**

**TINICUM TOWNSHIP
POLICE DEPARTMENT**

165 MUNICIPAL ROAD
PIPERSVILLE, PA 18947
610-294-9158 FAX 9200

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The undersigned, being duly sworn according to law herein swears and/or affirms that I have been a continuous resident of the Commonwealth of Pennsylvania for a period of at least ten (10) years prior to the date that I executed this Affidavit. Furthermore, I swear and/or affirm that I am not named in a statewide data base as the perpetrator of a founded report related to sexual misconduct at any time preceding the date of the execution of this Affidavit.

Furthermore, I hereby swear and/or affirm that I have not been convicted of one or more of the following offenses or an equivalent crime under federal law or the law of another State or the District of Columbia:

1. Chapter 25 (relating to criminal homicide).
2. Section 2702 (relating to aggravated assault).
3. Section 2709.1 (relating to stalking).
4. Section 2901 (relating to kidnapping).
5. Section 2902 (relating to unlawful restraint).
6. Section 3121 (relating to rape).
7. Section 3122.1 (relating to statutory sexual assault).
8. Section 3123 (relating to involuntary deviate sexual intercourse).
9. Section 3124.1 (relating to sexual assault),
10. Section 3125 (relating to aggravated indecent assault).
11. Section 3126 (relating to indecent assault).
12. Section 3127 (relating to indecent exposure).
13. Section 4302 (relating to incest).
14. Section 4303 (relating to concealing death of child).
15. Section 4304 (relating to endangering welfare of children).
16. Section 4305 (relating to dealing in infant children).
17. A felony offense under section 5902(b) (relating to prostitution and related offenses).
18. Section 5903(c) or (d) (relating to obscene and other sexual materials and performances).
19. Section 6301 (relating to corruption of minors).
20. Section 6312 (relating to sexual abuse of children).
21. The attempt, solicitation or conspiracy to commit any of the offenses set forth in this paragraph.
22. A felony offense under the Controlled Substance, Drug, Device and Cosmetic Act.

I understand that the execution of this Affidavit will only obviate the necessity of securing a federal criminal records check from the FBI and that there is still the requirement to secure a report of criminal history information from the Pennsylvania State Police.

I verify that the facts and statements contained in this Affidavit are true and correct to the best of my knowledge, information and belief. I understand that any false statements herein are made subject to the penalties of 18 Pa. C.S.A. Section 4903, relating to false swearing in official matters.

Witness:	
Sworn to and Subscribed before me this ____ day	
Signature:	Date:
Print Name:	
Address:	
Notary Public:	
My Commission Expires:	
Notary Signature:	