



Hemlock Township Kiosk Application

1. Address of property where kiosk will be located: _____

2. Name of Person Applying: _____ Phone Number: _____
Address: _____

3. Company Name: _____ Company Phone Number: _____
Company Address: _____

If the applicant is not the property owner, a letter of permission from owner must be included with application.

4. When ready, mail permit? _____ (specify address: _____) Pick-up permit? _____

5. Dimensions for Kiosk space being applied for: Width: _____ Length: _____

6. Columbia Mall Applicants~
Location of space in the Mall. _____

7. Permit requested for the following dates: From: _____ To: _____ Indefinite: _____

8. What type of items will be sold from this Kiosk location:
a. _____ c. _____
b. _____ d. _____

9. Kiosk Permit fees: see fee schedule. Check must be submitted with application for approval

10. Submit Application to:
Hemlock Township Supervisors
Attn: Zoning Officer
26 Firehall Road, Bloomsburg, PA 17815

11. Make check payable to:
Hemlock Township Supervisors

12. Signature of Applicant: _____ Date: _____

Note: Questions about this application can be directed to the Hemlock Township Zoning Officer at 570-784-6178.