



CITY OF WESTMINSTER

56 West Main Street, Ste 1

Westminster, MD 21157

www.westminstermd.gov

HANDBILL DISTRIBUTION APPLICATION

1. Applicant – name, address and telephone number:

2. Business name, address and telephone number:

3. Description of item(s) being distributed: _____

4. Names of participants: _____

5. Date(s) for distribution: _____

6. Location(s) of distribution: _____

I HEREBY AGREE, IF SAID PERMIT IS GRANTED, TO ABIDE BY ALL ORDINANCES AND RESOLUTIONS OF THE MAYOR AND COMMON COUNCIL OF WESTMINSTER AND ALL PERMIT CONDITIONS.

THE FACTS SET FORTH IN THIS APPLICATION ARE TRUE AND CORRECT. ANY MATERIALLY FALSE STATEMENTS ARE GROUNDS FOR REVOCATION OF THE PERMIT. **Submit signed application and the non-refundable \$25 application fee to the City of Westminster at 56 West Main Street, Ste 1, Westminster, MD 21157.**

Date

Signature

(SEAL)

FOR OFFICE USE ONLY

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