

Application For Solicitation Permit

Permit #: _____

Name of Applicant: _____

Address: _____

Occupation: _____

Employer Represented: _____

Purpose of Permit: _____

Location Of Solicitation: _____

Description Of Goods For Sale: _____

Length Of Time Permit Is Desired: _____

(Each Permit Valid For 1 Month)

Do You Have A Criminal Record? _____

If Yes, Please Explain: _____

Dates Permit Will Be Used: From: _____ To: _____

Vehicle To Be Used Year: _____ Make: _____

During Solicitation: Model: _____ Color: _____

Registration #: _____

Signature Of Applicant: _____ Date: __/__/__