

HOUSE TO HOUSE SOLICITATION APPLICATION

BUSINESS/ORGANIZATION NAME: _____

BUSINESS ADDRESS: _____

FEDERAL ID #: _____

TELEPHONE #: _____

SOLICITOR IS A(N): EMPLOYEE or SUBCONTRACTOR

SOLICITORS NAME: _____

SOLICITORS ADDRESS: _____

VEHICLE MAKE/MODEL/LICENSE NO: _____

Nature, character and quality of the goods or services to be offered: _____

If goods:

- 1) What is the invoice value? _____
- 2) Where and by whom are they manufactured or grown? _____
- 3) Where are such goods at the time of application? _____

DATES FOR PERMIT: _____

(PERMIT VALID FOR 90 DAYS FROM ISSUE DATE)

Are there any criminal convictions pending or against your business or applying solicitors?

NO YES – please explain: _____

I give consent to permit access to any confidential records of the applicant held by physicians, better business bureaus, consumer credit agencies, law enforcement agencies, social security administration records, courts lawfully constituted and any other agency or source which shall exist or hereafter be created by law with the obligation to record information about the applicant.

(Print Name)

(Signature)

(Date)

**PLEASE ATTACH THE FOLLOWING TO THE COMPLETED APPLICATION
AS REQUIRED BY ORDINANCE NO 2017-O-07:**

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- ✓ Copy of valid driver's license
 - ✓ Color passport style photo
 - ✓ Copy of Occupational license allowing business in Independence
 - ✓ Fee of \$50 for primary license, \$25 for each additional solicitor
 - ✓ Any printed advertising proposed to be used in connection with business